

Welcome to the semi-annual State of the State Webinar, presented by the DBHDS Office of Provider Development, where we will be reviewing the information from the Provider Data Summary from May 2021.

# Waiver Rates Public Comment



**BURNS & ASSOCIATES**  
A DIVISION OF HEALTH MANAGEMENT ASSOCIATES

[Home](#) [Contact Us](#)

[Home](#) > Virginia Developmental Disabilities Waiver Rate Study

Public comment through Burns  
& Associates through August 20,  
2021

<https://www.burnshealthpolicy.com/ddwaiverratestudy/>

## BACKGROUND

The Virginia Department of Behavioral Health and Developmental Services (DBHDS), in collaboration with the Department of Medical Assistance Services, is in the process of reviewing payment rates for services delivered through the DD Waivers as well as Personal Assistance, Respite, Nursing, and Service Facilitation services across programs. The Burns & Associates division of Health Management Associates (HMA-Burns) is assisting in the review and has established this website to host project-related materials.

## PROPOSED RATE MODELS

HMA-Burns has developed proposed rate models and is seeking input on these proposals.

- The proposed rate models can be accessed [here](#).
- A recorded webinar that describes HMA-Burns' approach to rate-setting can be accessed [here](#).
- A recorded webinar that walks-through the proposed rate models can be accessed [here](#).
- The PowerPoint presentation used in the webinars can be accessed [here](#).

DBHDS and DMAS will review submitted comments before finalizing the rate models. Written comments will be accepted through August 20 and should be submitted to [bsmith@healthmanagement.com](mailto:bsmith@healthmanagement.com).

## PROVIDER SURVEY

A key consideration in the rate study was a provider survey that collected information regarding providers' operations and costs.

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Reminder to review and provide input into the proposed waiver rates at the link provided.

## What we will cover



- Introduction
- Provider Development activities
- Key Performance Measures & Targets
- Regional data
- Spotlight
- Opportunities
- Next steps
- Questions and suggestions

Today, we will go over an introduction to the Provider Data Summary, Provider Development Activities, our Key Performance Measures and Targets, Regional Data, Opportunities for service expansion, our next steps, and then we will end with the opportunity for you all to pose questions and offer suggestions.

## Mission



- The Office of Provider Development focuses on developing and sustaining a qualified community of providers in Virginia so that people who have developmental disabilities and their families have choice and access to options that meet their needs.



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Our mission at The Office of Provider Development is to focus on developing and sustaining a qualified community of providers in Virginia so that people who have developmental disabilities and their families have choice and access to options that meet their needs.



# Provider Data Summary Report




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**Semi-annual Report**

Reports, webinar slideshows, and other materials related to Provider Development are available for download online at <http://www.dbhds.virginia.gov/developmental-services/provider-development>.

PROVIDER DATA SUMMARY NOVEMBER 2020



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This is the sixth Provider Data Summary Report that provides updates on the status of DD Waiver service availability and activities completed by the Office of Provider Development (OPD) in the Division of Developmental Services (DDS) at the Department of Behavioral Health and Developmental Services (DBHDS).

Provider Data Summary webinars continue on a semiannual basis to provide a forum for sharing the results of ongoing analysis of the opportunities for DD services development across all regions.

This webinar will include a basic overview of findings, provide support on using the data provided, and encourage the development of business acumen in the DD provider community.

Reports, webinar slideshows, and other materials related to Provider Development can be downloaded from the provider development page on the DBHDS website.

## Services Considered



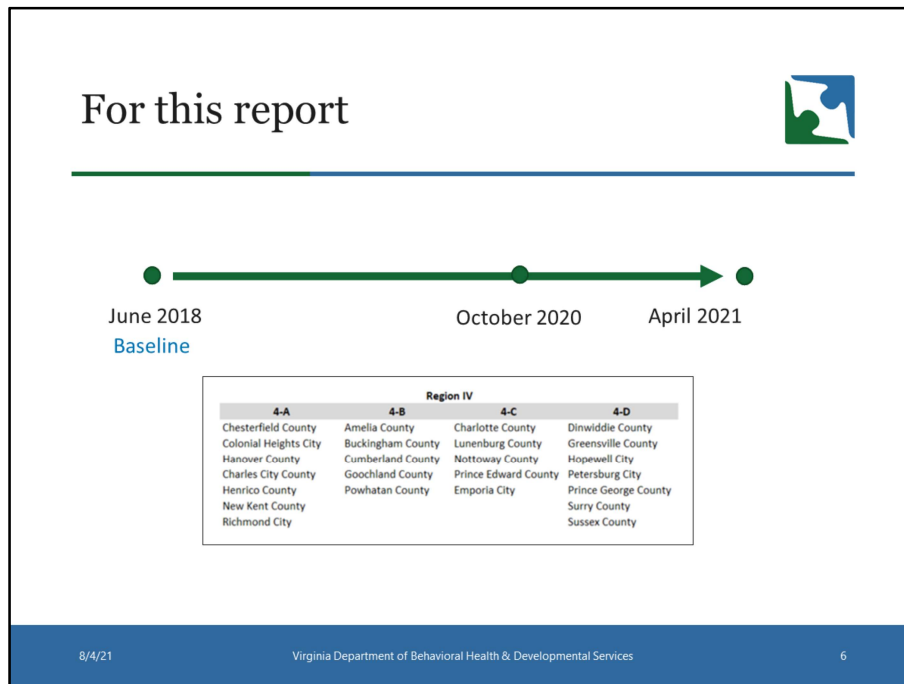
- Benefits Planning
- Community Coaching
- Community Engagement
- Community Guide
- Electronic Home-Based Services
- Employment and Community Transportation
- Independent Living Supports
- In-home Supports
- Peer Mentoring
- Shared Living
- Supported Living
- Crisis Support Services
- Private Duty Nursing
- Skilled Nursing
- Sponsored Residential

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As with the last report, there is consideration of a subset of DD Waiver services considered to be more integrated or critical, which include: Benefits Planning, Community Coaching, Community Engagement, Community Guide, Electronic Home- Based Services, Employment and Community Transportation, Independent Living Supports, In-home Supports, Peer Mentoring, Shared Living, Supported Living, Crisis Support Services, Private Duty Nursing, Skilled Nursing, and Sponsored Residential.



Much of the data in this report are compared across three points in time – June 2018 (which is the date of our baseline data), October 2020, and April 2021 - so that a more meaningful understanding of progress can be achieved.

Also considered in the data are regional subareas that are defined for you in the Provider Data Summary Report.

This report provides a means to share Virginia's success in meeting measures established under the Settlement Agreement.

# Baseline Measurement Tool



Location of the BMT online:

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Home Getting Help Offices About DBHDS Contact Us SELECT LANGUAGE

**BEHAVIORAL HEALTH**

- Community Services Boards (CSBs)
- Children and Families
- Mental Health Services
- Office of Recovery Services

**DEVELOPMENTAL SERVICES**

- Early Intervention for Infants and Toddlers
- Office of Integrated Health
- Developmental Disability Service System
- Individual and Family Support Program (IFSP)

Support Coordination/Case Management Resources

Victims of Sterilization Fund Program

**Provider Development**

Community Integration and Transition Supports

**Virginia Provider Data Summary**

On November 9th, 2017, the Office of Provider Development in the (DBHDS) hosted the first Provider Data Summary webinar as a way the Commonwealth. Provider Data Summary webinars are planned services across all regions. Information from these webinars will be

- [05.2020 Baseline Measurement Tool](#)
- [05.2020 Provider Data Summary Report](#)
- [05.2020 Provider Data Summary Slides](#)
- [11.2019 Baseline Measurement Tool](#)
- [11.2019 Provider Data Summary Report](#)
- [11.2019 Provider Data Summary Slides](#)
- [Provider Data Summary Report \(June-Nov 18\)](#)

<http://www.dbhds.virginia.gov/developmental-services/provider-development>

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Providers are encouraged to download and use the Baseline Measurement Tool, which contains Waiver Management System data from current waiver authorizations. The BMT provides baseline and subsequent data on integrated services, collected at six month intervals, across all cities and counties in Virginia. The BMT also considers the DD Waiver population in each locality including type of waiver and Supports Intensity Scale© (SIS©) level. The BMT, webinar slideshows, and other materials related to Provider Development are available for download on the Provider Development webpage, as seen on this slide.

## Provider Development Activities



Community Resource Consultants met with 19 providers seeking to diversify or expand services.

### **Notable additions:**

- 2 new Electronic Home Based Services providers
- 4 new Private Duty Nursing providers
- 3 new Independent Living Supports providers
- 1 new Community Guide provider
- 1 new Supported Living Provider
- 1 new Sponsored Residential Provider

### **Barriers:**

- COVID-19, lack of detailed regulations, unsure of responsibilities of administering agency, staffing, American Sign Language supports, wheelchair accessibility, and individual Speech Pathology sessions under the DD Waiver are not reimbursable.

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Provider Development Activities from November 1, 2020 to April 30, 2021 included Community Resource Consultants meeting with 19 unique providers seeking to diversify or expand services. Region 1 had one provider, Region 3 had two providers, Region 4 had eight providers, Region 5 had seven providers, and one provider is offering services statewide. The Developmental Disabilities Waiver services being added by current providers or started by new providers are Peer Mentor Supports (1), Group Home (3), Group Home with Skilled Nursing (1), Electronic Home Based Services (2), Therapeutic Consultation – Speech (2), Therapeutic Consultation – Behavior Supports, Employment & Community Transportation (2), Agency Directed Personal Assistance (2), Agency Directed Respite (1), Benefits Planning (2), Community Engagement (1), In-Home Supports (3), Independent Living Supports (1), Community Guide (2), Supported Living (1), and Sponsored Residential (1). Barriers include COVID-19, lack of detailed regulations, unsure of responsibilities of administering agency, staffing, American Sign Language supports, wheelchair accessibility, and individual Speech Pathology sessions under the DD Waiver are not reimbursable.

## Provider Development Activities



### Provider Roundtables:

#### **November 2020:**

- Statewide Provider Roundtable had 387 participants

#### **February 2021:**

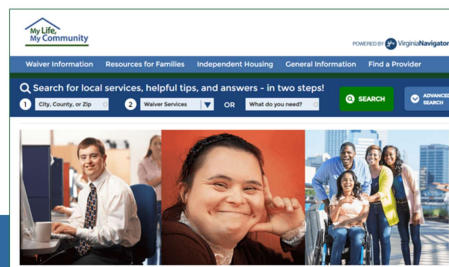
- Statewide Provider Roundtable had 500 participants.

The Office of Provider Development continues to hold statewide Provider Roundtable meetings quarterly via webinar. The November 2020 Provider Roundtable was attended by 387 participants, and the February 2021 Roundtable had 500 participants. These meetings serve as a forum to exchange information about topics impacting providers and support coordination, as well as provide space for shared learning.

## My Life My Community Provider Database and Designation Process



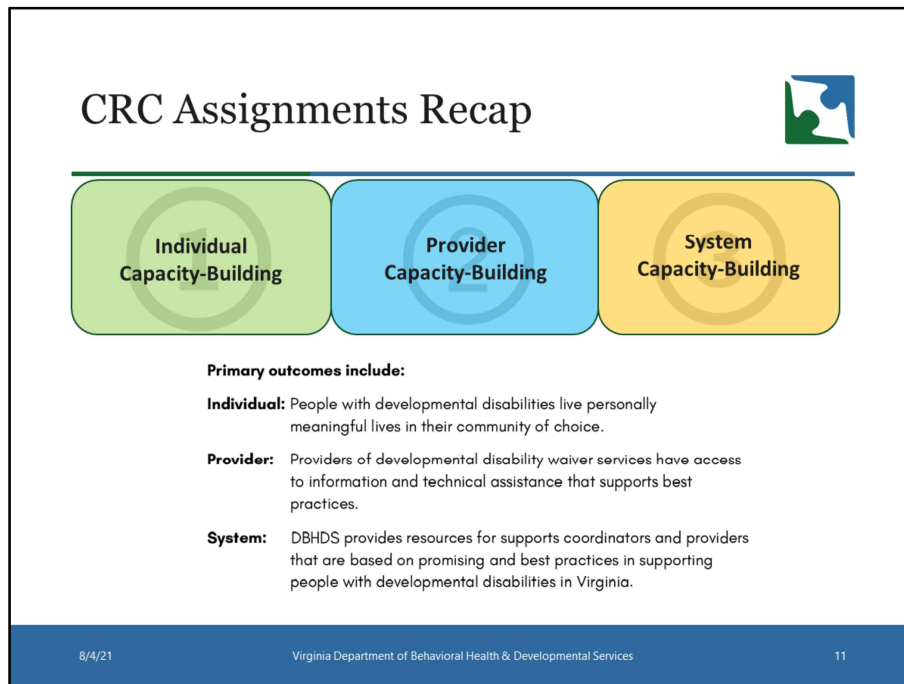
- Launched November 15, 2019.
- As of April 2021, 155 providers have registered.
- Provider Designation:
  - 4 providers hold badges in Autism, Behavioral Support, and Complex Health Supports
  - 25 have passed surveys with next step of submitting evidence



<https://mylifemycommunityvirginia.org/verify-or-register-new-provider-profile/>

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The My Life My Community (MLMC) Provider Database and Provider Designation Process were launched on November 15, 2019. All DD Waiver providers are encouraged to register on the database, which will serve as the centralized location for finding DD services in Virginia. As of April 2021, 155 providers registered and have DD Professional Membership at the MLMC Provider Database. Collectively, four providers hold badges in Autism, Accessibility, Behavioral Support, and Complex Health Supports. To date, twenty-five providers have passed surveys, and for some providers the next step is to submit the required evidential documents. Providers can check their status on the database and, if needed, register at the link on the slide.



In February 2020, the reassignment of Community Resource Consultants (CRCs) occurred across these three areas, providing access to one CRC in each capacity-building area per region.

Primary outcomes include:

Individual: People with developmental disabilities live personally meaningful lives in their community of choice.

Provider: Providers of developmental disability waiver services have access to information and technical assistance that supports best practices.

System: DBHDS provides resources for supports coordinators and providers that are based on promising and best practices in supporting people with developmental disabilities in Virginia.



## CRC Assignments Recap



<http://www.dbhds.virginia.gov/developmental-services/provider-development>

CRC Contacts by Capacity-Building Focus Area		
Individual	Provider	System
<b>FOR QUESTIONS ABOUT:</b> ↓ <ul style="list-style-type: none"> <li>• Regional Support Teams (RST)</li> <li>• Home and Community-Based Services Settings Requirements (HCBS)</li> <li>• Mandatory Provider Remediation</li> <li>• State Hospital Moves</li> <li>• Crisis Situations</li> <li>• Constituent Concerns</li> </ul>	<b>FOR QUESTIONS ABOUT:</b> ↓ <ul style="list-style-type: none"> <li>• Person-Centered Practices</li> <li>• Business Acumen</li> <li>• Provider Data Summary</li> <li>• Provider Designation Process</li> <li>• Provider Database</li> <li>• Provider Roundtables</li> <li>• Jump-Start Funding</li> <li>• DSP Orientation/ Competencies</li> <li>• Supervisory Training</li> <li>• ISP/Part V Training and TA</li> <li>• Provider Innovation Collaboratives</li> </ul>	<b>FOR QUESTIONS ABOUT:</b> ↓ <ul style="list-style-type: none"> <li>• Charting the Lifecourse®</li> <li>• Support Coordination</li> <li>• SC Manual/Modules</li> <li>• SC Meetings</li> <li>• SC Quality Review Survey</li> <li>• Medicaid Reviews (QMR)</li> <li>• Regional Quality Councils</li> <li>• Provider Readiness Education Program (PREP)</li> <li>• ISP Requirements</li> <li>• DD Waiver Policies and Regulations</li> </ul>

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Each region has 1 assigned CRC for each focus area. You can access the chart with who to contact in your region by going to the DBHDS website, click on, “getting help,” then “Provider Development,” and click on “Contacts” at the bottom of the page. Should you contact a CRC for a situation not in their focus area, they will direct you to the appropriate CRC in your region.

## Jump-Start Funding Program



- Awarded approximately \$1,350 between November 2020 and April 2021 to create integrated residential and day options in underserved areas
- Funds continue to be available to assist providers with expansion of integrated services in all regions, now including Skilled Nursing and Private Duty Nursing services.
- Program requirements have been revised to allow for application prior to the identification of individuals intending to use the new and/or expanded services.
- If interested in applying for funding to start or expand integrated services in an underserved area, visit:  
<http://www.dbhds.virginia.gov/developmental-services/provider-development>

-- Can request up to 50,000 per year for up to two needed services --

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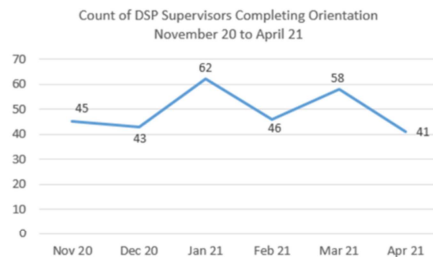
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The Jump-Start Funding Program has awarded \$1,350 for during the reporting period. Three applications were reviewed between November 2020 and April 2021, and all three are pending revisions. Funds continue to be available to assist providers with expansion of integrated services in all regions, now including Skilled Nursing and Private Duty Nursing services. Program requirements have been revised to allow for application prior to the identification of individuals intending to use the new and/or expanded services. Information on how to apply, JumpStart funding requirements, and the JumpStart Calculator can be accessed at <http://dbhds.virginia.gov/developmental-services/provider-development>.

## DSP Supervisory Training



- Updated to meet indicators of the DOJ Settlement Agreement
- Available on Commonwealth of Virginia Learning Center (COVLC) on July 1, 2020
- 3 modules that take approximately 2 ½ hours collectively to complete
- Mandatory for new DSP Supervisors and optional for DSP Supervisors who have already received a certificate from completing the previous version in COVLC



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The DSP Supervisory Training was updated and expanded to meet indicators of the DOJ Settlement Agreement, and it was made available on the Commonwealth of Virginia Learning Center (COVLC) July 1, 2020. This training consists of 3 modules that take approximately 2 ½ hours to complete. It is mandatory for new DSP Supervisors and optional for DSP Supervisors who have already received a certificate of completion of the previous version of the training in COVLC. Supervisory completion rates are included in the chart on this slide.

# DSP Orientation Training

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Coming soon

## DSP Supplemental Trainings

- Change in Mental Status
- Choking Risk

## Virtual Training



- On-Demand Part V training in COVLC completed by over 700 people.
- 9 instructor-led virtual sessions attended by 192 people.
- Two webinars for SCs to review ISP 3.2 changes attended by 665 people.
- DSP Orientation and Competencies webinars attended by 595 people.
- Instructor-Led Remote versions of PCT and Community Connections classes are available. <http://www.personcenteredpractices.org>
- Provider Readiness Education Program (PREP) attended by 54 providers.

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In order to continue to adapt to distance learning needs due to the COVID-19 pandemic, the Office of Provider Development continues to work to create virtual methods of providing training to providers throughout the Commonwealth. On-demand Part V training launched in January 2021 in the Commonwealth of Virginia Learning Center (COVLC). To date, over 700 people have completed this training. In addition to on-demand training, the Office of Provider Development has held nine live, instructor-led Part V Trainings via Zoom attended by 192 people. Two webinars were held for Support Coordinators to review changes to the ISP 3.2 in WaMS, attended by 665 people.

Five regional webinars were held in November 2020 to review the updated training and competency requirements in the DSP and DSP Supervisor DD Waiver Orientation and Competencies Protocol, dated March 6, 2020, with a sixth invitational webinar held in January 2021 for providers who had received citation in FY 19 regarding the DSP Orientation Training and Competencies. These webinars were attended by 595 people. A video recording of the webinar alongside a FAQ document and a copy of the PowerPoint have been uploaded to the Provider Development webpage.

Instructor Led Remote (virtual) versions of the Community Connections and Person Centered Thinking classes have been developed by The Learning Community for Person Centered Practices (TLCPCP). To register for one of these classes, visit

<http://www.personcenteredpractices.org/>. The Office of Provider Development worked alongside the Partnership for People with Disabilities at VCU to adapt the Plan Facilitation curriculum to an Instructor Led (virtual) format, which was piloted in April 2021 with 12 participants.

The Office of Provider Development held its third Provider Readiness Education Program (PREP) in January 2021 to orient new providers to the DD Waiver service system. This invitational training was attended by 54 providers. The next PREP training will tentatively occur July 2021.

## Key Performance Measures



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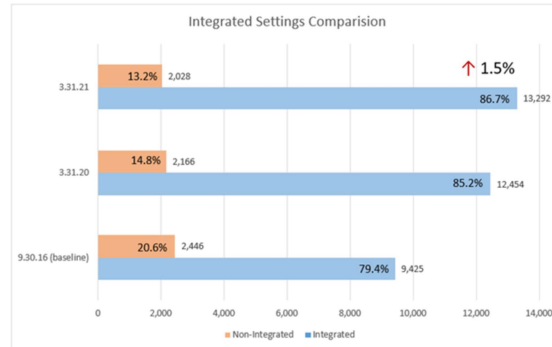
This section contains information about the results of various performance measures and additional data that helps in understanding the DD system of supports and services in Virginia. This content will be included in future reports to provide a more comprehensive understanding of services and people who access them.

Please refer to the Provider Data Summary report for methods for collection of each data set presented today.

## Key Performance Measures



**Data continues to indicate an annual 2% increase in the overall DD waiver population receiving services in the most integrated settings.**



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Our first Key Performance Measure is that “Data continues to indicate an annual 2% increase in the overall DD waiver population receiving services in the most integrated settings.”

The chart on this slide illustrates the overall trend in living situations for people with DD Waiver from March 31, 2020 to March 31, 2021 compared to baseline on September 30, 2016. Over the course of the last year there has been an overall shift of 1.5% toward more integrated settings. From baseline, there has been a total change of 41% more people in integrated settings, 17% fewer in less integrated settings, and population growth of 29%. Measure not met at 1.5% annual increase.



# Key Performance Measures



## Level of integrated living now reported by locality

As of March 31, 2021

Table 1. FY21Q3 Integrated Residential by Locality

Locality	Integrated	Non-Integrated	Total	%Integrated
Statewide	13,292	2,044	15,336	86.7%
Accomack County	64	6	70	91.4%
Albemarle County	120	21	141	85.1%
Alleghany County	42	4	46	91.3%
Amelia County	11	4	15	73.3%
Amherst County	174	6	180	96.7%
Appomattox County	37	0	37	100.0%
Arlington County	136	35	171	79.5%
Augusta County	165	4	169	97.6%
Bath County	4	4	8	50.0%
Bedford County	184	9	193	95.3%
Bland County	11	0	11	100.0%
Botetourt County	44	4	48	91.7%
Brunswick County	29	3	32	90.6%
Buchanan County	37	1	38	97.4%
Buckingham County	16	1	17	94.1%
Campbell County	168	9	177	94.9%

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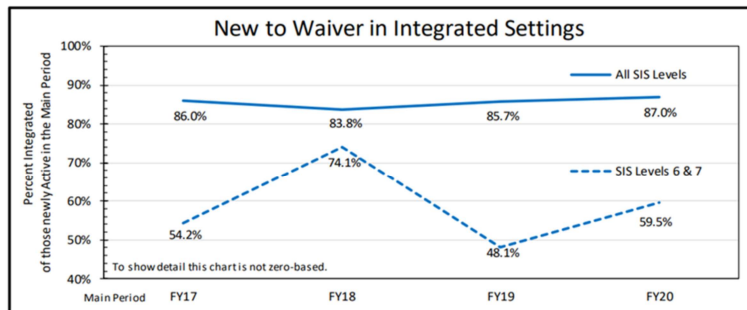
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In the May 2021 report you will find a breakdown of integrated living situations by locality. In addition to statewide numbers and percentage, you can see the number of individuals living in integrated settings, the number in non-integrated settings, and the percentage of individuals who reside in integrated settings.

## Key Performance Measures



Data continues to indicate that at least 90% of individuals new to the waivers, including for individuals with a “supports need level” of 6 or 7, since FY16 are receiving services in the most integrated setting.



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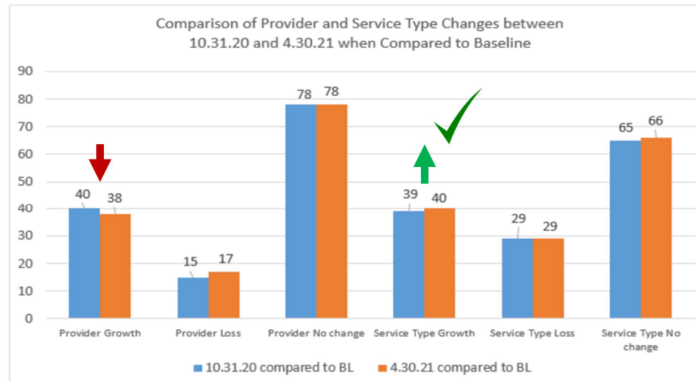
Key Performance Measure 2 is that “Data continues to indicate that at least 90% of individuals new to the waivers, including for individuals with a “supports need level” of 6 or 7, since FY16 are receiving services in the most integrated setting.”

The graph in this slide provides data that illustrates that 87% of all people new to the DD waivers reside in integrated settings in FY20 and among those, 59.5% of people with Supports Intensity Scale 6 or 7 receive services in integrated settings. Trend upwards noted for past two fiscal years in data. FY21 data will be available in the next report. At 87%, measure not met.

## Key Performance Measures



**The Data Summary indicates an increase in services available by locality over time.** (n=133 localities)



Our third measure is that “The Data Summary indicates an increase in services available by locality over time.”

This chart reports the number of localities demonstrating an increase in the number of providers, within the locality, offering more integrated or specialized services above the established baseline and/or showing an increase in the number of integrated or specialized service types offered, within the locality, above the established baseline. Data reflects the comparison in numbers between October 2020 and April 2021 with baseline in 2018. When considering both factors, while there has been a decrease in the number of localities regarding provider count within 2 localities, service type growth occurred in one locality. Measure met.

## Key Performance Measures



**86% of people with a DD waiver, who are identified through indicator #13 of III.D.6, desiring a more integrated residential service option (defined as independent living supports, in-home support services, supported living, and sponsored residential) have access to an option that meets their preferences within nine months.**

	Region 1	Region 2	Region 3	Region 4	Region 5
Number with Barrier 2	2	0	2	1	0
Number not expressing interest in more integrated settings	1	0	1	1	0
Number identified desiring more integrated residential	1 (11/9/20)	0	1 (12/22/20)	0	0
Number where there was no option in desired area	0	0	0	0	0
Number choosing more integrated <9 months of meeting	0	0	0	0	0
Number choosing alternate option <9 months	1 (2/21/20) (4 bed group home) ✓	0	1 (1/29/21) (4 bed group home) ✓	0	0
Number resolved >9 months of meeting	0	0	0	0	0
Number choosing alternate option >9 months	0	0	0	0	0
Number in process	0	0	0	0	0

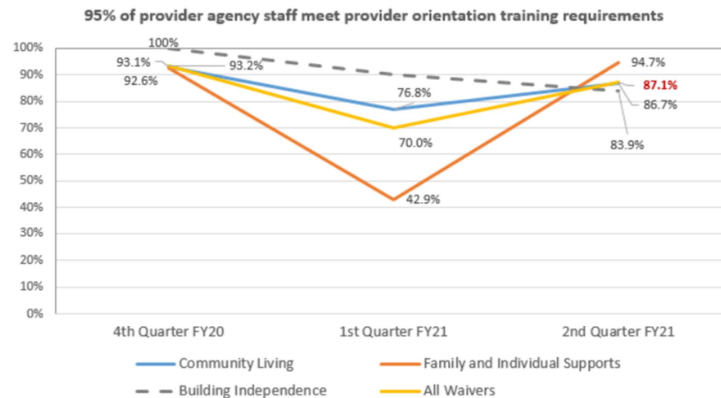
Our 4<sup>th</sup> measure is that “86% of people with a DD waiver, who are identified through indicator #13 of III.D.6, desiring a more integrated residential service option (defined as independent living supports, in-home support services, supported living, and sponsored residential) have access to an option that meets their preferences within nine months.”

The chart on this slide illustrates that during the 2nd quarter there were 5 individuals who identified with barrier 2 during the referral process. Of these 5, two expressed interest in more integrated residential services defined as independent living supports, in-home support services, supported living, and sponsored residential. In both instances, Sponsored Residential services were available, but not selected by the individual. Both identified individuals selected 4 bed group homes from the options considered. There were no referrals in Quarter 3 identified with Barrier 2. Measure met.

## Key Performance Measures



### 95% of provider agency staff meet provider orientation training requirements



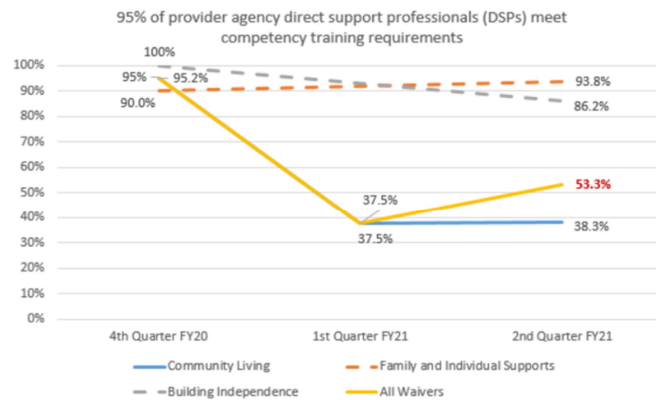
Measure 5 is that “86% of provider agency staff meet provider orientation training requirements.

Quality Review Team data demonstrates a decrease in compliance from 4th quarter FY20 to 2nd quarter FY21 reporting. Reporting across all quarters is reflected in the chart below, no record reviews reported for the Building Independent Waiver in the 1st quarter FY21. Considered together, results are 87.1%, which fall below the 95% target. Measure not met.

## Key Performance Measures



### 95% of provider agency direct support professionals (DSPs) meet competency training requirements



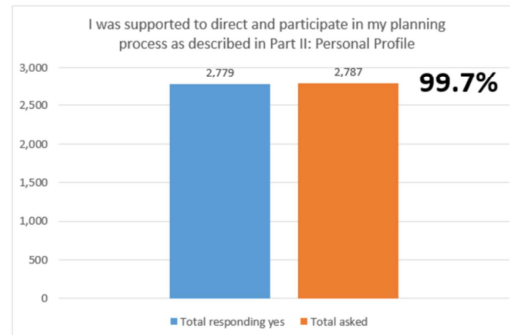
Measure 6 is that “86% of provider agency direct support professionals (DSPs) meet competency training requirements.”

Quality Review Team data demonstrates a decrease in compliance from 4th quarter FY20 to 2nd quarter FY21 reporting. Reporting across all quarters is reflected in the chart below, no record reviews reported for the Family and Individual Supports and Building Independent Waiver in the 1st quarter FY21. Considered together, results are 53.3%, which fall below the 95% target. Measure not met.

## Key Performance Measures



**At least 95% of people receiving services in residential settings/their authorized representatives participate in the development of their own service plan.**



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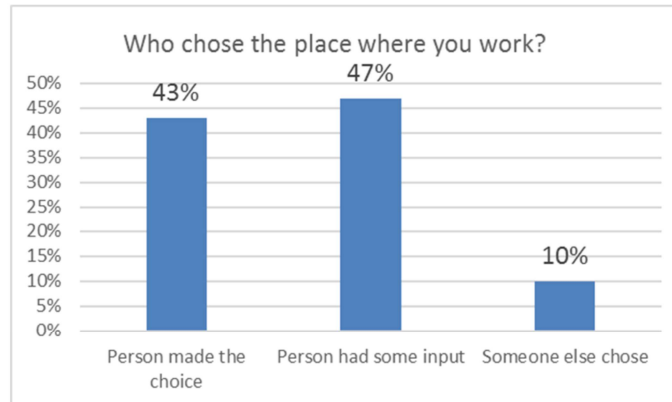
Measure 7 is: At least 95% of people receiving services in residential settings/their authorized representatives participate in the development of their own service plan.

This measure was consistently above 99% during FY21. Measure met.

## Key Performance Measures



**At least 75% of people with a job in the community chose or had some input in choosing their job.**



Measure 8 is: At least 75% of people with a job in the community chose or had some input in choosing their job. Source NCI.

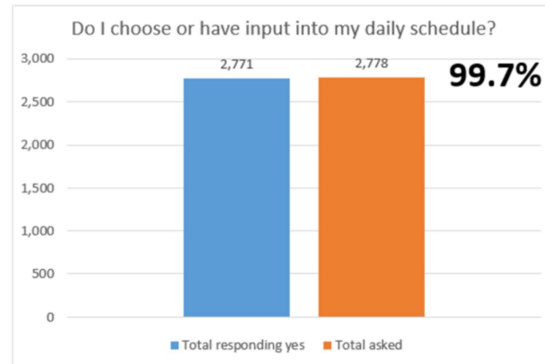
This chart is derived from the National Core Indicators In-Person Survey (IPS) State Report 2019-20 Virginia (VA) Report. Results indicate that a combined 90% of those surveyed who had a job (n=51) either chose or had some input on choosing their job. Measure met. 2020-2021 data not yet available. Source: National Core Indicators Virginia Report



## Key Performance Measures



**At least 86% of people receiving services in residential settings/their authorized representatives choose or help decide their daily schedule.**



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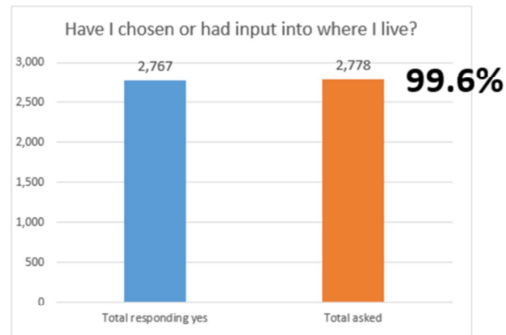
Measure 9 is: At least 86% of people receiving services in residential settings/their authorized representatives choose or help decide their daily schedule.

This measure was consistently above 99% during FY21. Measure met.

## Key Performance Measures



**At least 75% of people receiving services who do not live in the family home/their authorized representatives chose or had some input in choosing where they live.**



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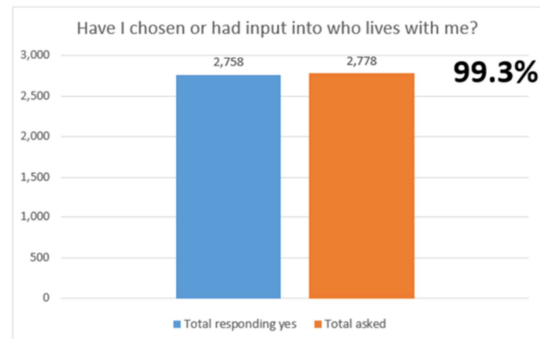
Measure 10 is: At least 75% of people receiving services who do not live in the family home/their authorized representatives chose or had some input in choosing where they live.

This measure was consistently above 99% during FY21. Measure met.

## Key Performance Measures



**At least 50% of people who do not live in the family home/their authorized representatives chose or had some input in choosing their housemates.**



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Measure 11 is: At least 50% of people who do not live in the family home/their authorized representatives chose or had some input in choosing their housemates.

This measure was consistently above 99% in FY21. Measure met.

## Demographic Data



- Waitlist
  - by region and priority
  - by time on waitlist and age
- Residential setting size and type
- Day Services by type
- Data specific to types of services received by region
- Availability of specific services
- Waiver Service Authorizations by region.

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The May 2021 Provider Data Summary Report contains demographic data you can use to make decisions on starting or expanding services. In the report you will find demographic data on:

The Waitlist

- by region and priority, and
- by time on waitlist and age

Residential setting size and type

Day Services by type

Data specific to types of services received by region

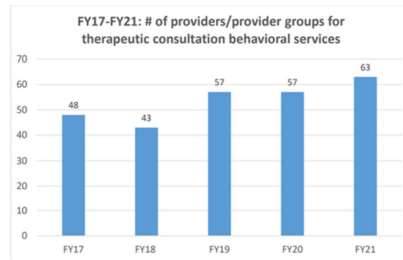
Availability of specific services, and

Waiver Service Authorizations by region.

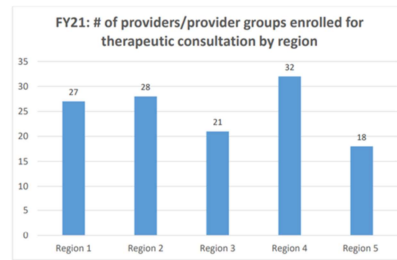
## Behavioral Services Providers



Past 5 years:



Fiscal Year 21:



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The data to the left displays the number of providers and/or provider organizations providing therapeutic consultation behavioral services over the past five fiscal years (note: FY21 data is through the end of April 2021). It should be noted that the counts presented may display individual practitioners that have a solo practice consisting of one behaviorist, as well as larger provider groups that have many behaviorists employed and are providing this waiver service.

The graph to the right displays the number of providers and/or provider organizations by region that are providing therapeutic consultation behavioral services to individuals in FY21 (note: data are through the end of April 2021). When reviewing these data, it should be noted that numerous providers deliver services across multiple regions of the state, thus a total count of providers in the histogram above would exceed the total number of providers that are delivering this service.

## Net Losses (unique)



### Since June 2018...

Crisis Services = -1 providers; +77 people

Skilled Nursing = -3 providers; -3 people

Note: These account for the only net losses by unique providers

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In the upcoming regional data, you will see that Crisis Services have lost 1 unique provider since June 2018, with an increase of 77 people authorized for crisis and Skilled Nursing services have lost 3 providers, with a decrease of 3 people authorized for skilled nursing.

## Notable Updates



- Between FY18 and FY21, there has been a trend upward with people new to the waiver living in integrated settings
- Since 2016, there has been an increase from baseline of 3,867 people living in integrated settings
- In the past six months, service growth occurred in one locality and 60% (80) of the localities have a level of integration at or above 86%
- The report format now includes the data source and/or method for information provided
- The RST barriers section has been expanded to include two new barrier themes (program readiness and frequent hospitalizations) and more service summaries

Some notable updates from the report are that

- Between FY18 and FY21, there has been a trend upward with people new to the waiver living in integrated settings
- Since 2016, there has been an increase from baseline of 3,867 people living in integrated settings
- In the past six months, service growth occurred in one locality and 60% (80) of the localities have a level of integration at or above 86%
- The report format now includes the data source and/or method for information provided
- The RST barriers section has been expanded to include two new barrier themes (program readiness and frequent hospitalizations) and more service summaries

# Remote Supports



<https://www.youtube.com/watch?v=TEft27FFgYU>

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In order to enhance the information provided through this report, DBHDS focuses on a special topic or area that may be shared once for information and review, or may contribute to ongoing analysis. This report introduces new information about Remote Supports. DBDHS will be collecting suggestions from providers participating in the semi-annual webinars for future topics to ensure new content is tailored to community interests and needs.

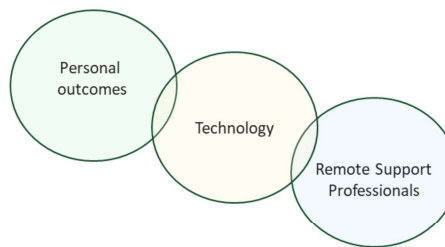
Here is a short video that demonstrates some possibilities with remote supports.



# Remote Supports



**Remote Supports** is a technology-based service that allows trained remote support professionals (RSPs) to deliver live support to an individual at a remote location. Its primary goal is to foster an individual's safety to allow them to live more independently in the community.



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Remote Supports, sometimes referred to as Remote Supports, is a technology-based service that allows trained remote support professionals (RSPs) to deliver live support to an individual at a remote location. Its primary goal is to foster an individual's safety to allow them to live more independently in the community. Remote Supports are delivered by awake, alert remote support professionals whose primary duties are to provide remote supports from the provider's secure remote supports facility. Communications have secure access with encryption and are monitored by the provider to ensure constant, stable connectivity for the person.

# Remote Supports



## Remote Supports



- are driven by the person through person-centered planning
- provides personalized solutions based on individual needs
- leverage a wide range of technology solutions
- ensure privacy through secure encryption standards
- helps many states address the DSP crisis by supplementing direct supports

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## Remote Supports

are driven by the person through person-centered planning

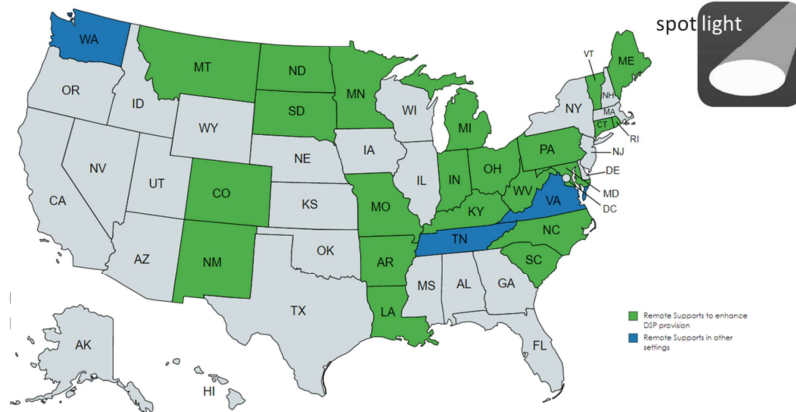
provides personalized solutions based on individual needs

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ensure privacy through secure encryption standards

helps many states address the DSP crisis by supplementing direct supports

## Remote Supports

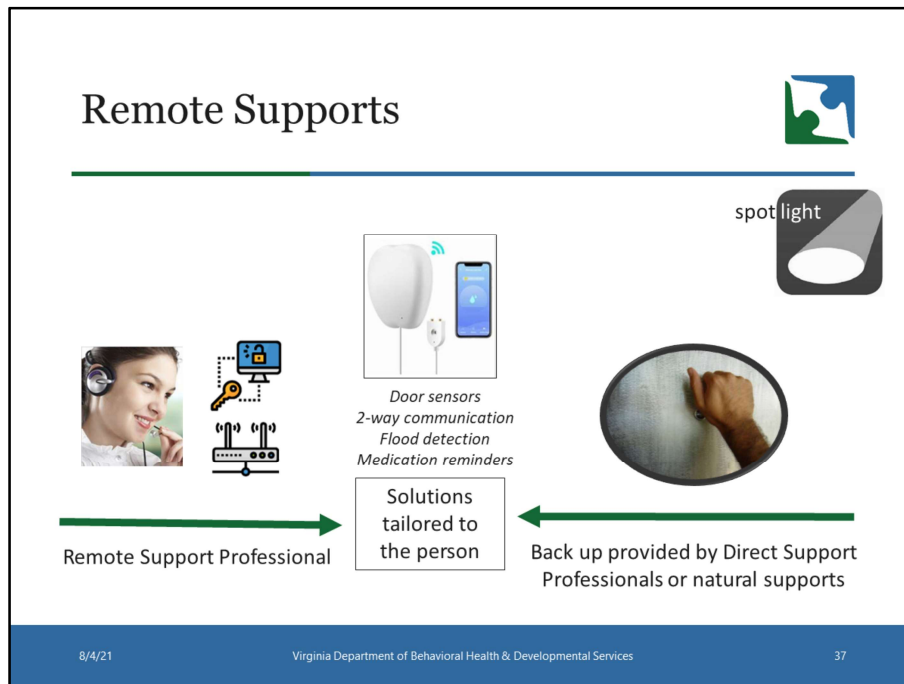


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In Virginia, Remote Supports, sometimes referred to as Remote Monitoring, are available as a component of Electronic Home-Based Services. EHBS combines technology solutions that are centered on increasing a person's independence and self-reliance in the community while decreasing the need for paid staff. Remote supports is an option under this service. Many states have moved toward utilizing Remote Supports as a way to supplement the need for Direct Support Professionals during an industry shortage of DSPs. Currently, 22 states use Remote Supports as a way to enhance supported living. Three states, including Virginia, use the service in other settings. Source: Ralph Lollar, Director of Division of Long Term Services and Supports, Disabled and Elderly Health Program Group, at CMS




With remote supports, individuals use technology solutions combined with supports from Remote Support Professionals, as well as DSPs and Natural Supports, to tailor a system of supports that wrap around a person so they can have the right amount of supports that they need in order to live the life they want.

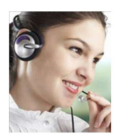

# Remote Supports



## Electronic Home-based Supports



- Service in Virginia that covers Remote Supports
- Limited to \$5,000/ISP year for equipment and remote support
- Incompatible with group home, sponsored, or supported living
- Can be provided in combination with other home supports
- Cost of equipment can limit availability of remote support under current limits

✓ Remote Supports

Compatible

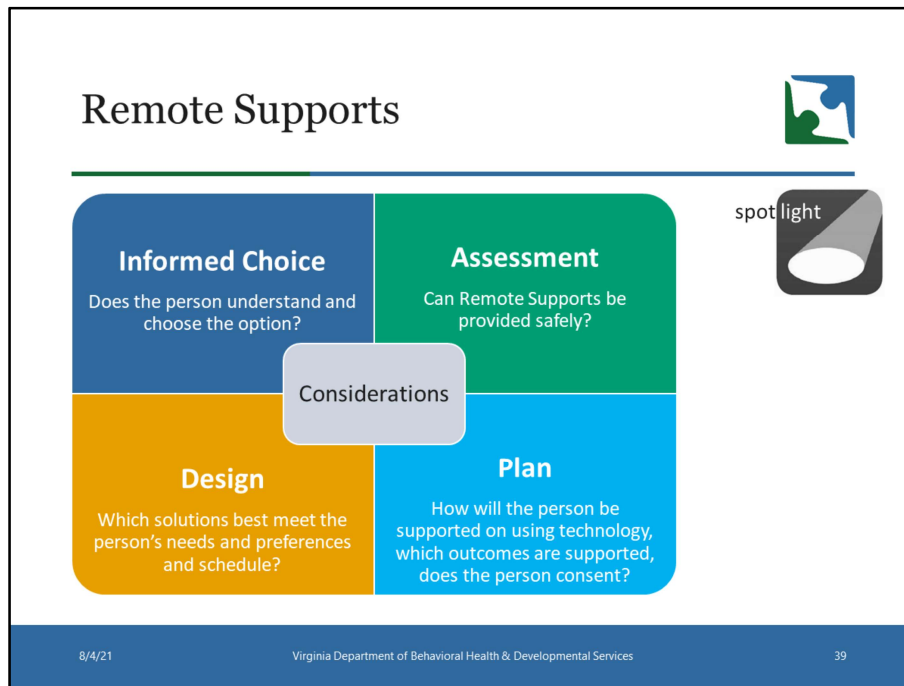
✓ Independent Living Supports  
 ✓ Shared Living  
 ✓ In-home Support Services  
 ✓ Personal Assistance

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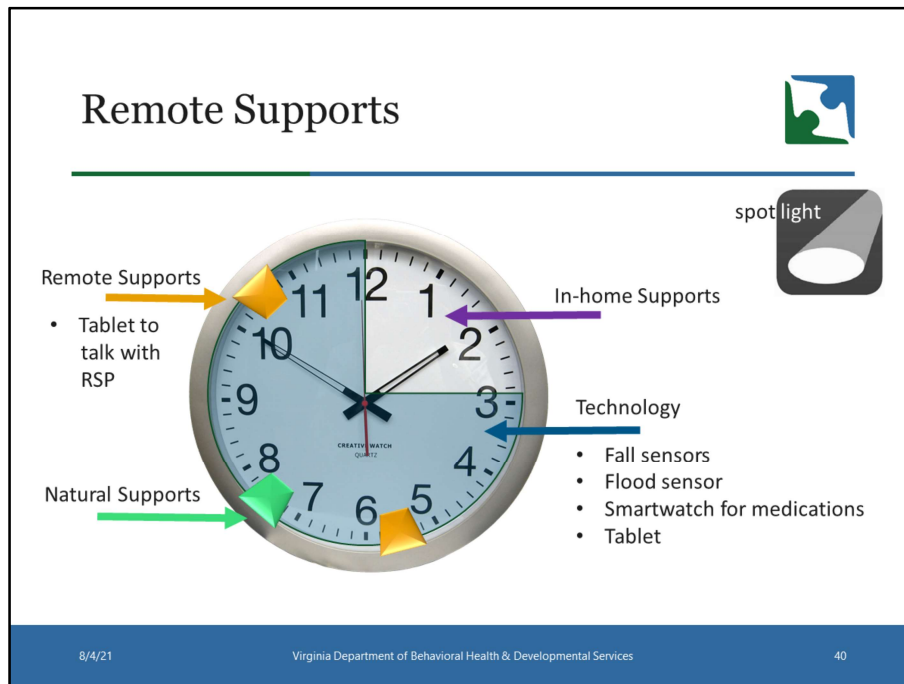
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Given current Developmental Disabilities Waiver regulations, Virginia has an opportunity to explore how to expand access to Remote Supports, which can complement services that support independent living. Under current funding, EHBS is limited to \$5,000 per individual per ISP year. This amount is used in obtaining and installing a personalized package of technology solutions, which increase safety, independence, and/or social connection. Remote Supports is covered in the FIS, CL, and BI waivers, but is incompatible with Supported Living, Sponsored Residential, and Group Home Residential under current regulations.



Planning teams can support people with waiver to understand possible options for how technology can be beneficial, discuss Remote Supports as currently available under EHBS, and refer to an EHBS provider to complement direct service provision for people in their own homes. It is important that people with waiver make informed decisions about Remote Supports and understand benefits and risks of the option.



In this example, John has In-home Support Services from noon to 3pm. He utilizes a variety of technology solutions when at home the rest of the day. Remote Supports are provided at 5pm and 10pm. He has dinner with friends at 7pm. This fits with John's good life and desire to live alone with the right amount of support based on his preferences and needs.

# Remote Supports



If you have questions about Remote Supports or EHBS, reach out to the assigned Provider Team Community Resource Consultant in your area.



Individual	Provider	System
FOR QUESTIONS ABOUT: ↓ <ul style="list-style-type: none"><li>• Regional Support Teams (RST)</li><li>• Home and Community-Based Services Settings Requirements (HCBS)</li><li>• Mandatory Provider Remediation</li><li>• State Hospital Moves</li><li>• Crisis Situations</li><li>• Constituent Concerns</li></ul>	FOR QUESTIONS ABOUT: ↓ <ul style="list-style-type: none"><li>• Person-Centered Practices</li><li>• Business Acumen</li><li>• Provider Data Summary</li><li>• Provider Designation Process</li><li>• Provider Database</li><li>• Provider Roundtables</li><li>• Jump-Start Funding</li><li>• DSP Orientation/ Competencies</li><li>• Supervisory Training</li><li>• ISP/Part V Training and TA</li><li>• Provider Innovation Collaboratives</li></ul>	FOR QUESTIONS ABOUT: ↓ <ul style="list-style-type: none"><li>• Charting the Lifecourse®</li><li>• Support Coordination</li><li>• SC Manual/Modules</li><li>• SC Meetings</li><li>• SC Quality Review Survey</li><li>• Medicaid Reviews (QMR)</li><li>• Regional Quality Councils</li><li>• Provider Readiness Education Program (PREP)</li><li>• ISP Requirements</li><li>• DD Waiver Policies and Regulations</li></ul>

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For questions about Remote Supports of EHBS, reach out to the Provider Team CRC in your area.



## Children's and Youth Residential



Table 1. Counts of distinct Individuals by Authorization and Region.

Approved Authorization	Primary_DBHDS_Region					Distinct Total	%
	1	2	3	4	5		
Group Home 4 or fewer	0	0	1	3	0	4	17%
Group Home 5 or more	0	0	0	4	0	4	17%
Sponsored Residential	0	1	4	3	9	17	71%
Distinct Total	0	1	5	9	9	24	100%
Percent	0%	4%	21%	38%	38%	100%	

Table 2. Counts of Providers (distinct TaxIdentifiers) by Authorization and Region.  
For those Authorizations listed in Table 1.

Approved Authorization	Primary_DBHDS_Region					Distinct Total	%
	1	2	3	4	5		
Group Home 4 or fewer	0	0	1	2	0	3	33%
Group Home 5 or more	0	0	0	1	0	1	11%
Sponsored Residential	0	1	3	2	2	6	67%
Distinct Total	0	1	4	4	2	9	100%
Percent	0%	11%	44%	44%	22%	100%	

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In the previous reporting period, we spotlighted Children's and Youth Residential services.

Based on the information provided here, showing the regional breakdown of providers and number of children/youth supported, a limited number of children currently receive congregate residential services under the DD waiver in Virginia with none receiving these services in region 1 currently. The data provided in the two tables below are based on approved service authorization lines over the report period from November 1, 2020 thru April 30, 2021. The region determined by service zip code and provider tax identifier for individuals from birth age less than 18 as of April 30, 2021. Source: WaMS Service Authorizations

## Sponsored Residential



Living Situation On Waiver Type	Level	#
Sponsored Residential	1	23
	2	344
	3	62
	4	892
	5	134
	6	233
	7	252
	D2	8
	Total	1,948

Total # individuals with Active Status

15,332

Living Situation On Waiver Type	Tier	#
Sponsored Residential	1	23
	2	344
	3	954
	4	619
	D2	8
	Total	1,948

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In response to a request for more specific information about SRS, we have included preliminary information regarding individuals in SRS at different SIS levels. This data is based on Living Situation in WaMS rather than actual service authorizations. We are working on the latter for more accurate results.

## Regional Data



For each more integrated or critical service:

- Change in non-unique providers by regional sub-area
- Total of people authorized
- Change in number of authorizations
- Net gains/losses of providers
- Total number of providers by regional sub-area

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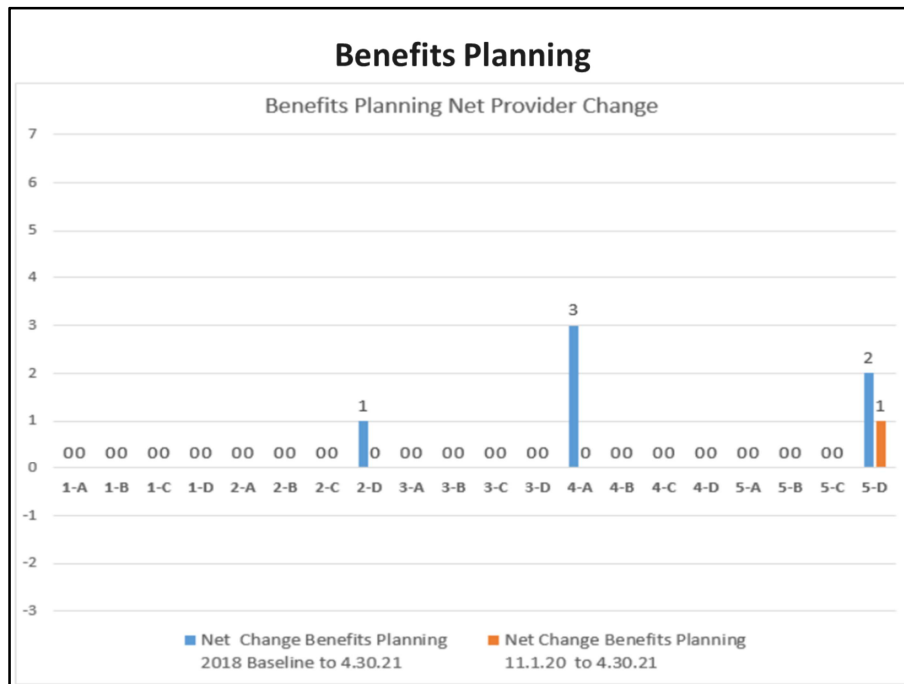
The following charts review the change in non-unique providers for each more integrated or critical service by regional subarea, followed by total people authorized for that service, change in number of authorizations, as well as net gains and losses of providers by that service, and total number of providers by regional subarea.

## Regional Subareas



Region I				Region IV			
1-A	1-B	1-C	1-D	4-A	4-B	4-C	4-D
Caroline County Fredericksburg City King George County Spotsylvania County Stafford County Culpeper County Madison County Orange County Fauquier County Rappahannock County	Augusta County Highland County Staunton City Waynesboro City Alleghany County Covington City Bath County Buena Vista City Lexington City Rockbridge County	Harrisonburg City Rockingham County Frederick County Page County Shenandoah County Warren County Winchester City Clarke County Bedford County Campbell County Lynchburg City	Nelson County Louisa County Albemarle County Charlottesville City Fluvanna County Greene County Amherst County Appomattox County Bedford County Campbell County Lynchburg City	Chesterfield County Colonial Heights City Hanover County Charles City County Henrico County New Kent County Richmond City	Amelia County Buckingham County Cumberland County Goochland County Powhatan County	Charlotte County Lunenburg County Nottoway County Prince Edward County Emporia City	Dinwiddie County Greensville County Hopewell City Petersburg City Prince George County Surry County Sussex County
Region II				Region V			
2-A	2-B	2-C	2-D	5-A	5-B	5-C	5-D
Alexandria City Arlington County	Fairfax City Fairfax County Falls Church City	Loudoun County	Manassas City Manassas Park City Prince William County	Essex County Gloucester County King and Queen County King William County Lancaster County Mathews County Middlesex County Northumberland County Richmond County Westmoreland County	Accomack County Northampton County	James City County Poquoson City Williamsburg City York County Hampton City Newport News City	Chesapeake City Norfolk City Portsmouth City Virginia Beach City Franklin City Isle of Wight County Southampton County Suffolk City
Region III							
3-A	3-B	3-C	3-D				
Botetourt County Craig County Roanoke County Salem City Giles County Montgomery County	Franklin County Danville City Pittsylvania County Henry County Martinsville City Halifax County Mecklenburg County Brunswick County Patrick County	Carroll County Galax City Grayson County Bland County Wythe County Floyd County Pulaski County Radford City	Buchanan County Russell County Tazewell County Dickenson County Bristol City Washington County Smyth County Lee County Norton City Scott County Wise County				

For the following data, each of the 5 regions throughout the state are broken into 4 subareas. Take a second to look at these tables to determine in which subarea your location falls.



Benefits planning shows an increase of 1 non-unique provider in 2-D which is Prince William County and Manassas, 3 in 4-A the Richmond Area, and 2 in 5-D, the Tidewater area, since 2018.

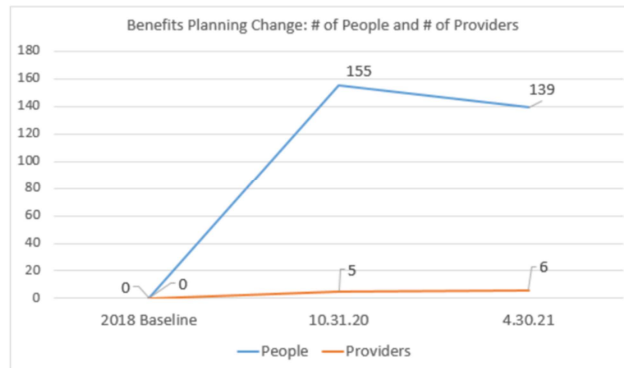
## Benefits Planning

**Benefits Planning Providers**  
**Total (4.30.21)**

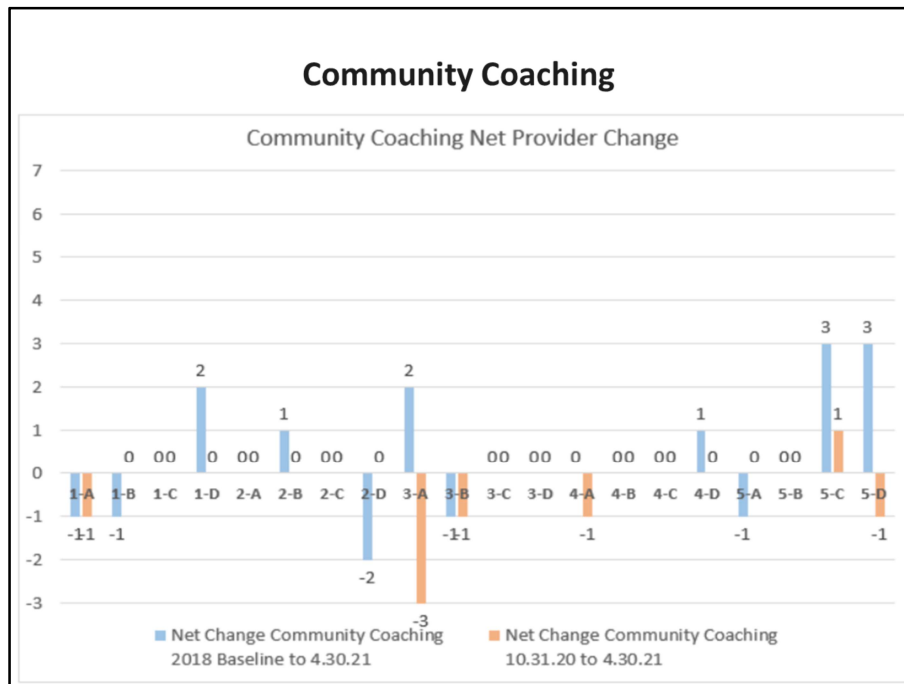
1-A	0
1-B	0
1-C	0
1-D	0
2-A	0
2-B	0
2-C	0
2-D	1
3-A	0
3-B	0
3-C	0
3-D	0
4-A	3
4-B	0
4-C	0
4-D	0
5-A	0
5-B	0
5-C	0
5-D	2

**Benefits Planning**

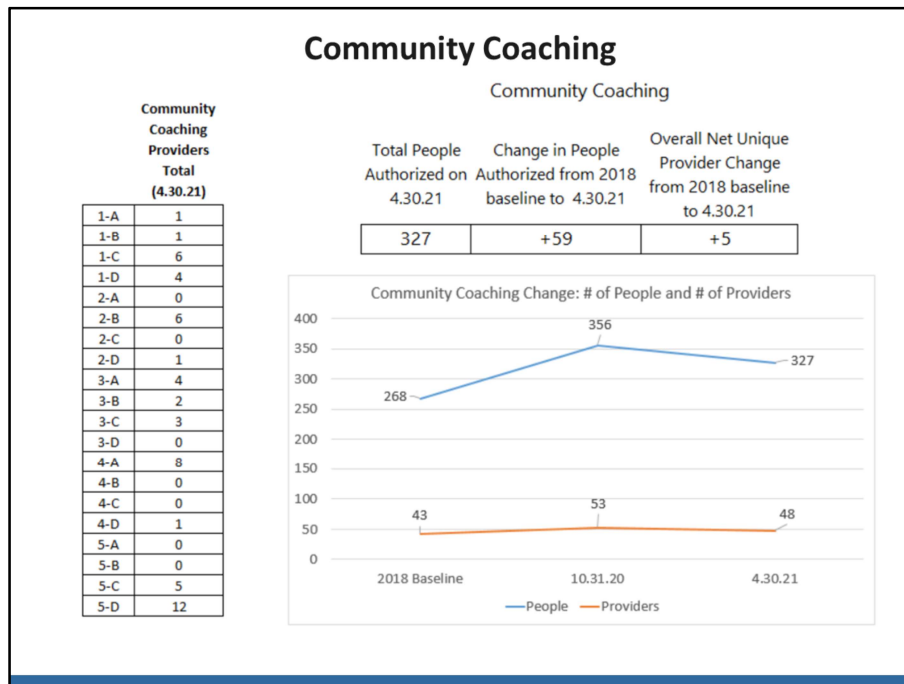
Total People Authorized on 4.30.21	Change in People Authorized from 2018 baseline to 4.30.21	Overall Net Unique Provider Change from 2018 baseline to 4.30.21
139	+139	+6



Benefits Planning remains a fairly new service. The total people authorized of 139 with 6 unique providers. As you can see in the table to the left, there is still plenty of opportunity to provide this service throughout the state.



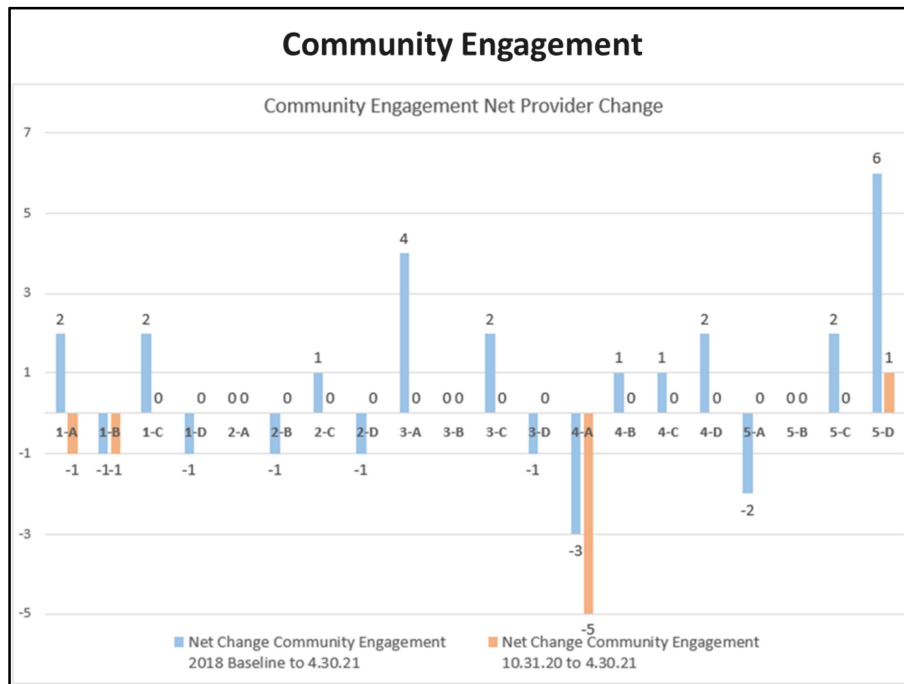
As for Community Coaching, you see there was a net loss during the reporting period of 3 non-unique providers in 3-A (Roanoke and surrounding areas) and 1 net provider each in 1-A (Rappahannock Area and Rappahannock-Rapidan), 3-B (Southside/Danville/Piedmont), 4-A (Richmond Metro area), and 5-D (tidewater). There was a net increase of 1 Community Coaching provider in 5-C (Historic Triangle/Hampton/Newport News) during the reporting period.



As we look at the data about unique authorizations and providers, we can see that as of 4/30/21, there were a total of 327 people with Community Coaching as a service, which is an increase of 59 since June 2018 with an overall increase of 5 providers since 2018.

As you can see to the left, that there is a lack of Community Coaching providers in 2-A (Alexandria/Arlington), 2-C (Loudoun), 3-D (Far Southwest), 4-B (Goochland-Powhatan and Crossroads), 4-C (District 19), 5-A (MPNN), and 5-B (Eastern Shore).





This is the non-unique data for Community Engagement. In regards to the non-unique data we will be looking at, it is possible that the providers show up repeatedly across subareas and regions.

As you can see, we lost 1 non-unique providers in 1-A (Rappahannock Area and Rappahannock-Rapidan), 5 in 4-A (Richmond Metro area), and gained 1 in 5-D (tidewater) during the reporting period.

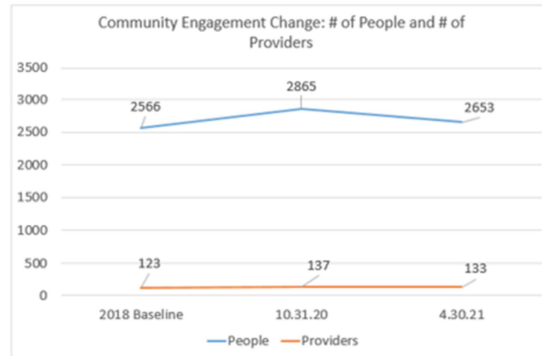
## Community Engagement

**Community  
Engagement  
Providers  
Total  
(4.30.21)**

1-A	8
1-B	3
1-C	12
1-D	8
2-A	1
2-B	7
2-C	2
2-D	3
3-A	13
3-B	9
3-C	6
3-D	9
4-A	21
4-B	3
4-C	4
4-D	5
5-A	0
5-B	1
5-C	12
5-D	26

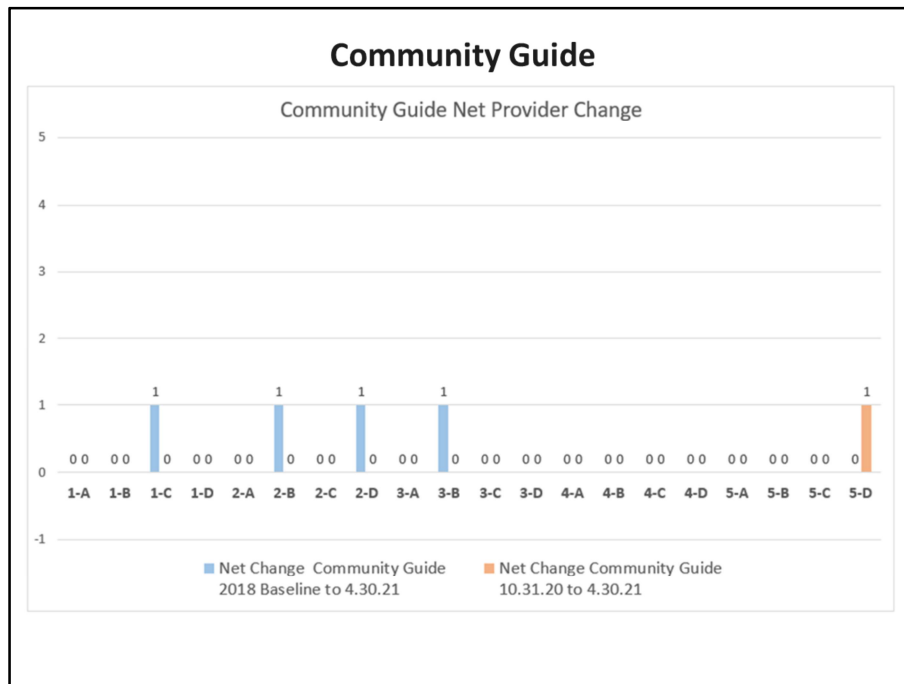
**Community Engagement**

Total People Authorized on 4.30.21	Change in People Authorized from 2018 baseline to 4.30.21	Overall Net Unique Provider Change from 2018 baseline to 4.30.21
2653	+87	+10



Here you see that as of the end of April, 2653 people were authorized for Community Engagement Services, which is an increase of 87 people since June 2018. Also, you can see there has been an overall net increase of 10 Community Engagement Providers in the state.

There are currently no Community Engagement providers in sub region 5-A (MPNN).

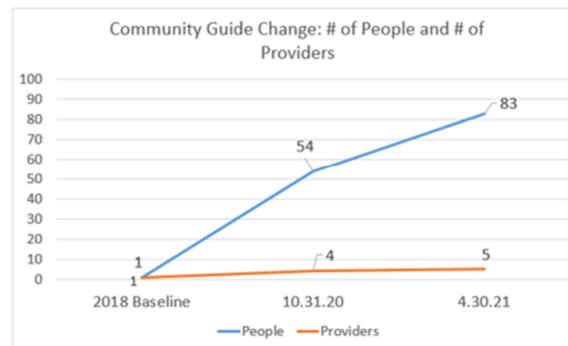


Community Guide is also a fairly new services with an increase of 1 non-unique provider in 5-D (Tidewater) during the reporting period.

## Community Guide

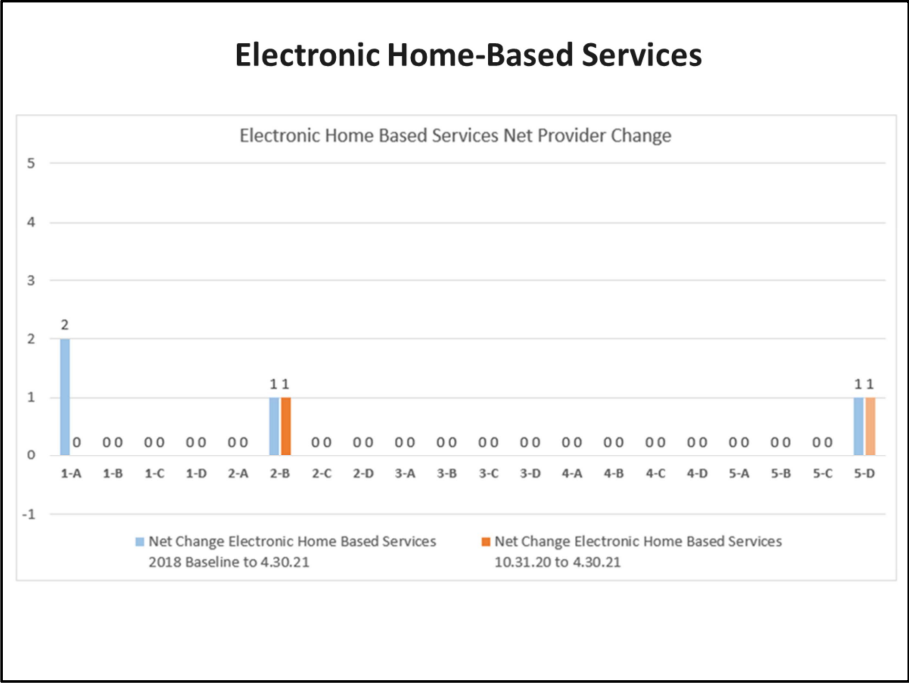
Community Guide Providers Total (4.30.21)	
1-A	0
1-B	0
1-C	1
1-D	0
2-A	0
2-B	1
2-C	0
2-D	1
3-A	0
3-B	1
3-C	0
3-D	0
4-A	0
4-B	0
4-C	0
4-D	0
5-A	0
5-B	0
5-C	0
5-D	1

Community Guide		
Total People Authorized on 4.30.21	Change in People Authorized from 2018 baseline to 4.30.21	Overall Net Unique Provider Change from 2018 baseline to 4.30.21
83	+82	+4



With a total of 54 people authorized, there are 5 unique providers of this service.

As you can see, there continues to be a vast opportunity throughout the state to provide Community Guide service.



Non-unique information for Electronic Home Based Services show a net increase of 1 provider in 2-B (Fairfax/Falls Church) and 1 in 5-D (tidewater) during the reporting period.

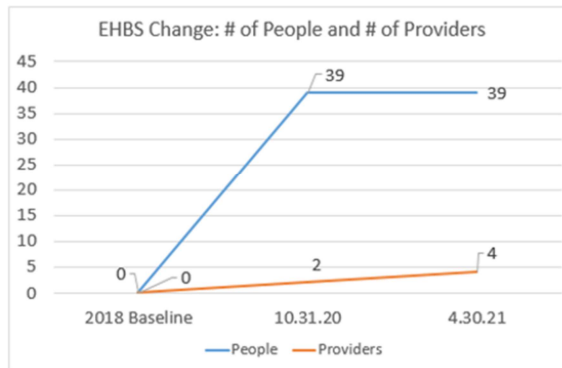
## Electronic Home-Based Services

### Electronic Home Based Services

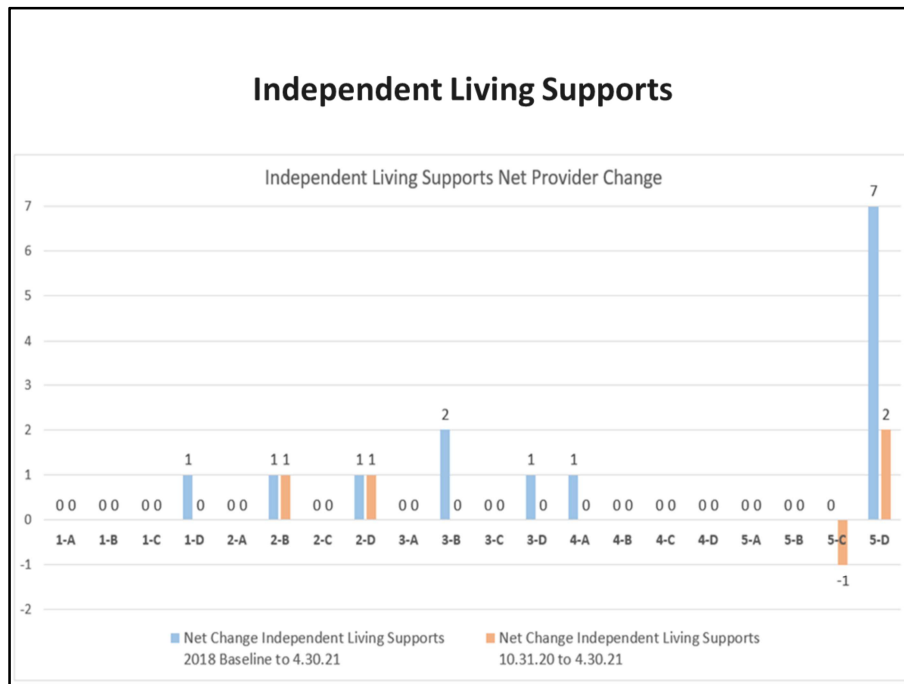
#### EHBS Providers Total (4.30.21)

1-A	2
1-B	0
1-C	0
1-D	0
2-A	0
2-B	1
2-C	0
2-D	0
3-A	0
3-B	0
3-C	0
3-D	0
4-A	0
4-B	0
4-C	0
4-D	0
5-A	0
5-B	0
5-C	0
5-D	1

Total People Authorized on 4.30.21	Change in People Authorized from 2018 baseline to 4.30.21	Overall Net Unique Provider Change from 2018 baseline to 4.30.21
39	+39	+4



Totals for Electronic Home Based Services are a total of 39 authorizations and there were 4 total unique providers as of 4/30/21, with an addition of 2 unique providers between October and April.



When we look at Independent Living supports, we can see an increase during the reporting period of 2 non unique providers in 5-D (Tidewater), 1 in 2-B (Fairfax/Falls Church), 1 in 2-D (Manassas and Prince William), and a loss of 1 provider in 5-C (Colonial/Hampton/Newport News).

## Independent Living Supports

ILS Providers Total (4.30.21)	
1-A	0
1-B	0
1-C	1
1-D	2
2-A	0
2-B	2
2-C	0
2-D	1
3-A	2
3-B	2
3-C	0
3-D	1
4-A	3
4-B	0
4-C	0
4-D	0
5-A	0
5-B	0
5-C	1
5-D	11

### Independent Living Supports

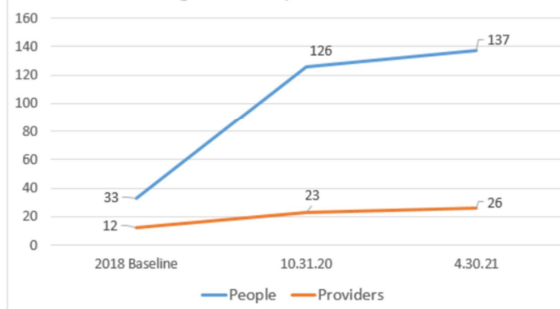
Total People Authorized on 4.30.21	Change in People Authorized from 2018 baseline to 4.30.21	Overall Net Unique Provider Change from 2018 baseline to 4.30.21
--	--	---

137

+104

+14

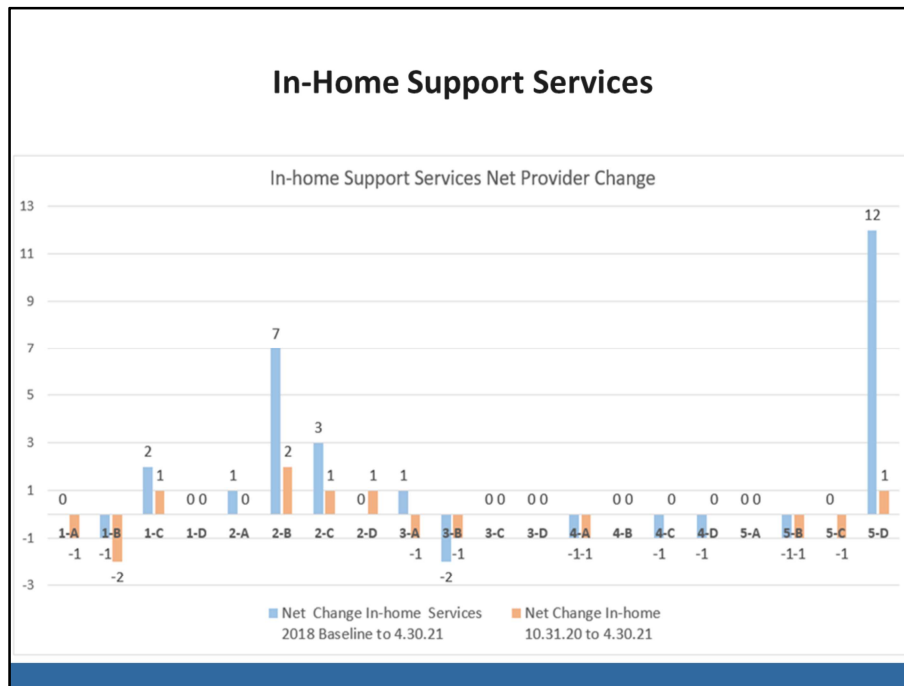
ILS Change: # of People and # of Providers



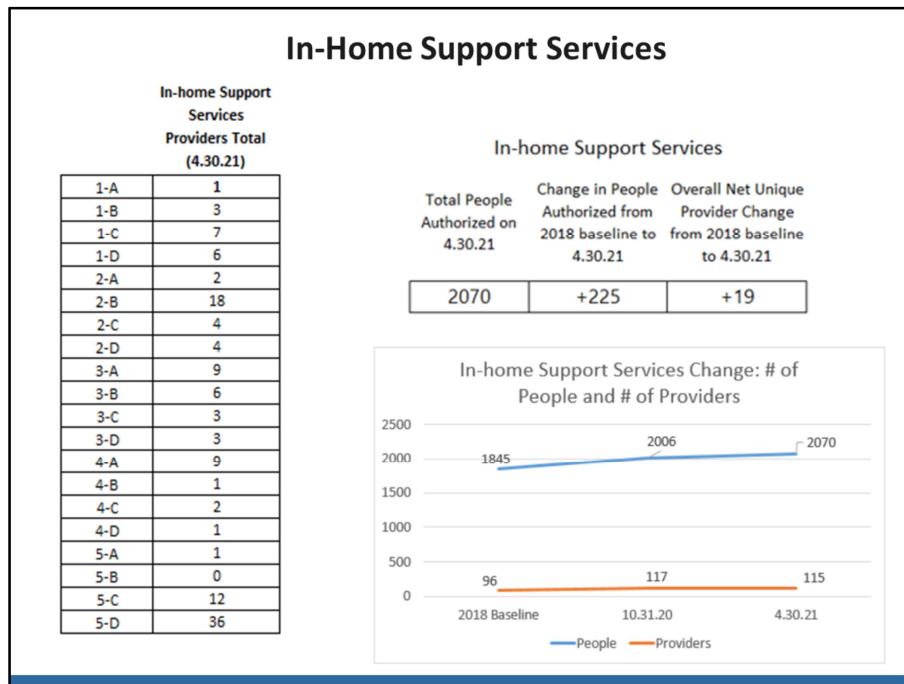
The unique authorization and provider data shows 137 people authorized for Independent Living, which is an increase of 104 people. There has been a net increase of 14 unique providers since June 2018 with 3 added during the reporting period.

As you look at the Total number of providers per subarea on the left, you will see there is still a wide opportunity for expansion into Independent Living Supports throughout the majority of the Commonwealth. For those providers who have a license for Supportive In-home and would like to add Independent Living Supports in one of these subareas, JumpStart funding is available. Contact your Provider Team CRC for more information.



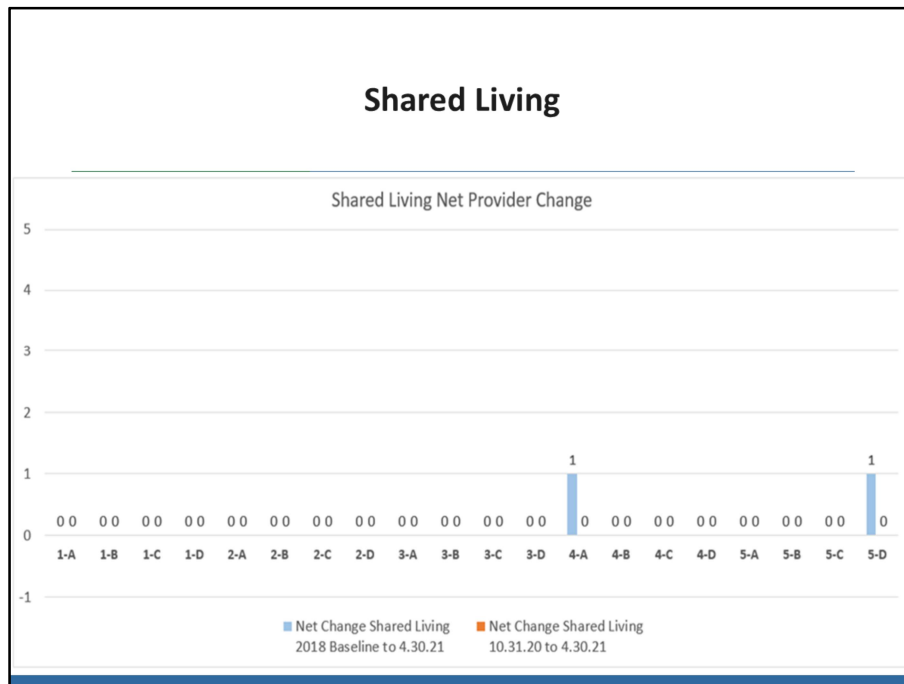


In Home Support Services have seen an increase during the reporting period of non-unique providers in 1-C (Northwestern VA), 2-B (Fairfax/Falls Church), 2-C (Loudoun), 2-D (Manassas/Prince William), and 5-D (Tidewater), with losses in 1-A (Rappahannock Area/Rappahannock-Rapidan), 1-B (Western VA), 3-A (Roanoke Area), 3-B (Southside/Danville/Peidmont), 4-A (Richmond), 5-B (Eastern Shore), and 5-C (Colonial/Hampton-Newport News).

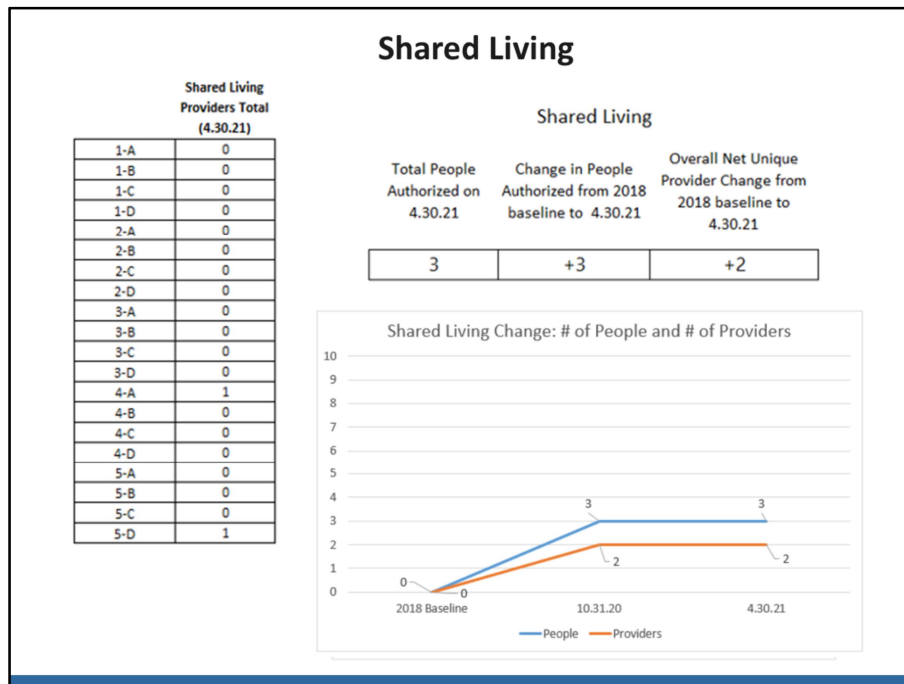


You can see here that total authorizations for In-Home as of the end of April are 2070, which is an increase of 225 since June 2018. There has been an overall net increase of 19 providers.

As the more people move from congregate settings into independent living situations and as the number of FIS Waivers awarded increases, there is going to continue to be a need for more In-Home providers throughout the state. As you look at the providers per subarea to the left, you can see that while there is a great opportunity to expand services throughout the majority of the Commonwealth.

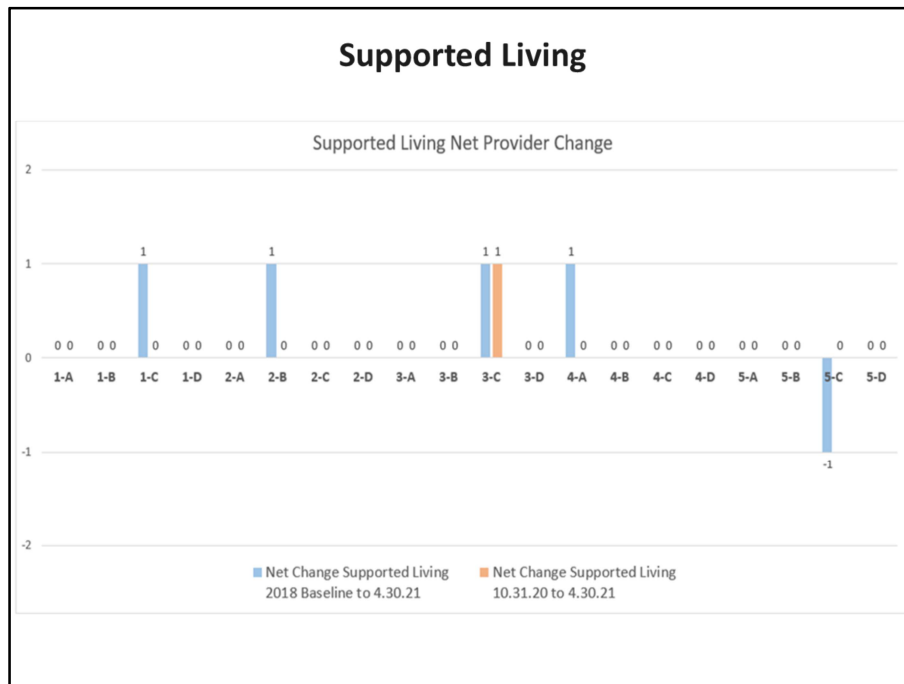


You can see for Shared Living, there has been an increase of 1 non-unique provider in both 4-A (Richmond Metro Area) and 5-D (tidewater).

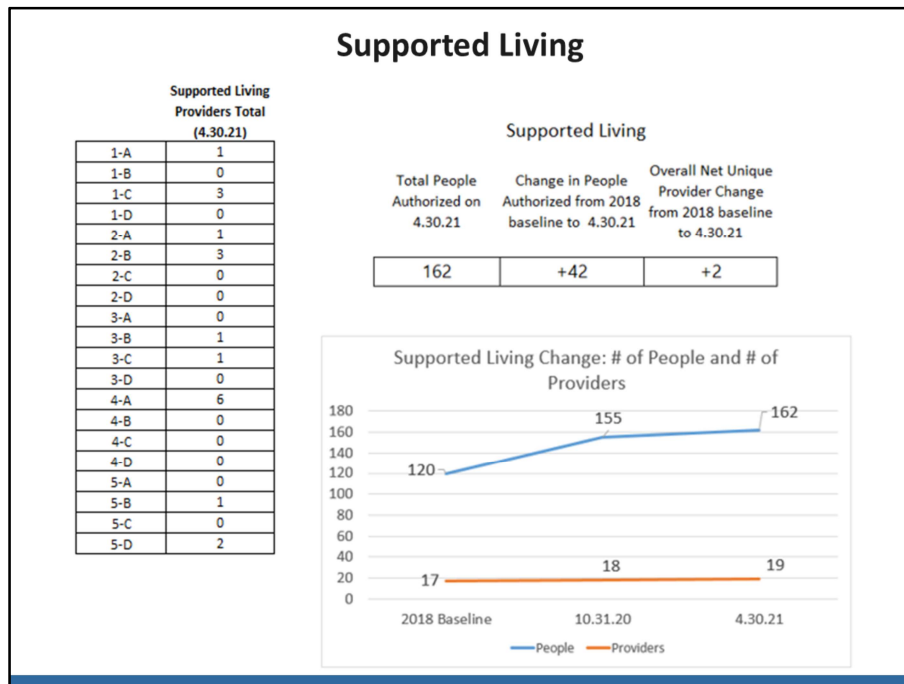


There are now 2 unique providers of this service supporting a total of 3 people; however, this service is currently only available in 2 sub regions of the state.

If you are interested in providing this service, please contact your Provider Team CRC to discuss how to get started and applying for JumpStart funding.

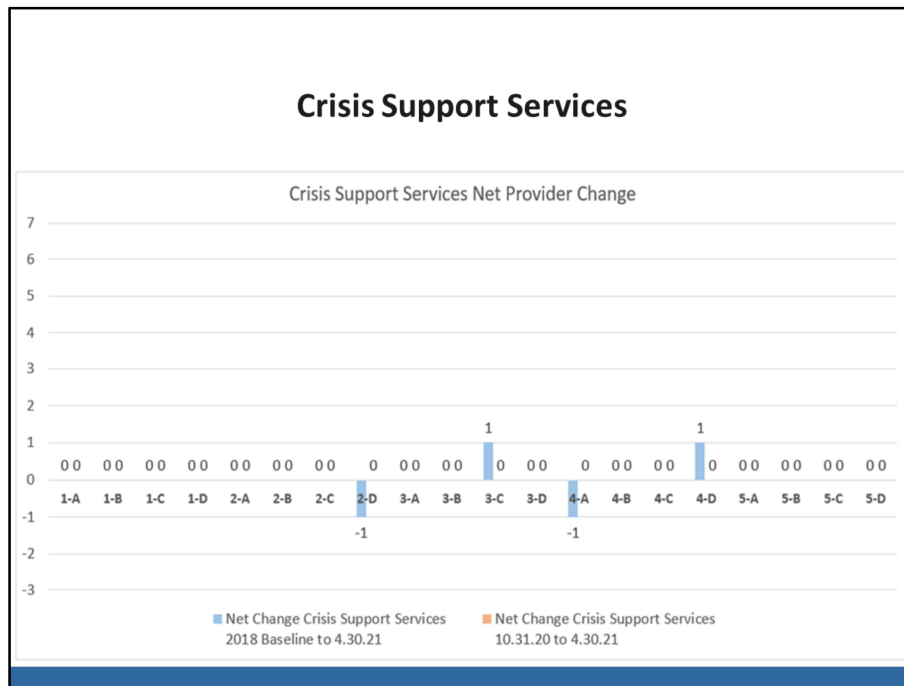


For Supported Living, you will see there is a net increase of 1 provider in 3-C (Mount Rogers/New River Valley) during the reporting period.



As of the end of October, there were 162 people authorized for Supported Living, which is an increase of 42, with a net increase of 2 unique providers.

You can see to the left that there continues to be a need for Supported Living providers throughout the Commonwealth, as this service is one of the 3 residential support options for people with the FIS waiver. With the implementation of new DD Waiver regulations, this service is now able to be provided under a Supportive In-Home License in addition to a Supervised Residential License. If you are interested in more information on how to add this service, please contact your Provider Team CRC. There is JumpStart funding available for this service.



You see here there is still a net loss of 1 non-unique Crisis Support providers in 2-D (Prince William/Manassas) and 4-A (Richmond metro) with a net increase of 1 in 3-C (Mt Rogers/New River Valley) and 4-D (District 19) with no changes in net providers during the reporting period.

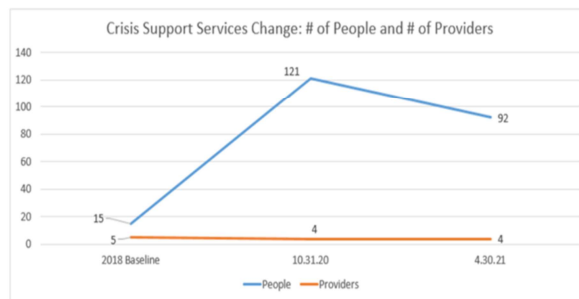
## Crisis Support Services

Crisis Support  
Services Providers  
Total (4.30.21)

1-A	0
1-B	0
1-C	0
1-D	0
2-A	0
2-B	1
2-C	0
2-D	1
3-A	1
3-B	0
3-C	1
3-D	0
4-A	0
4-B	0
4-C	0
4-D	1
5-A	0
5-B	0
5-C	0
5-D	0

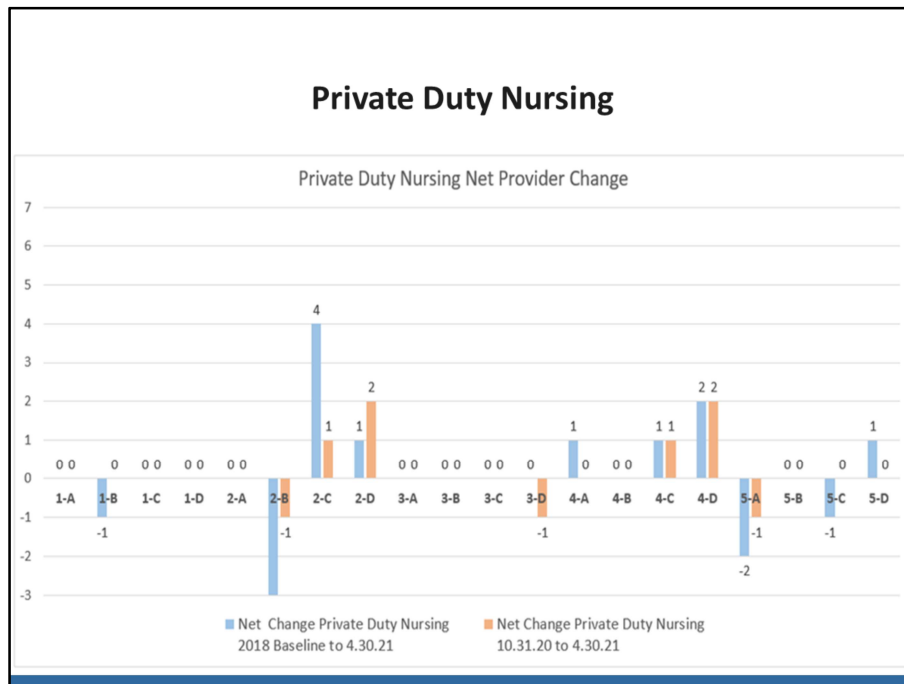
Crisis Support Services

Total People Authorized on 4.30.21	Change in People Authorized from 2018 baseline to 4.30.21	Overall Net Unique Provider Change from 2018 baseline to 4.30.21
92	+77	-1

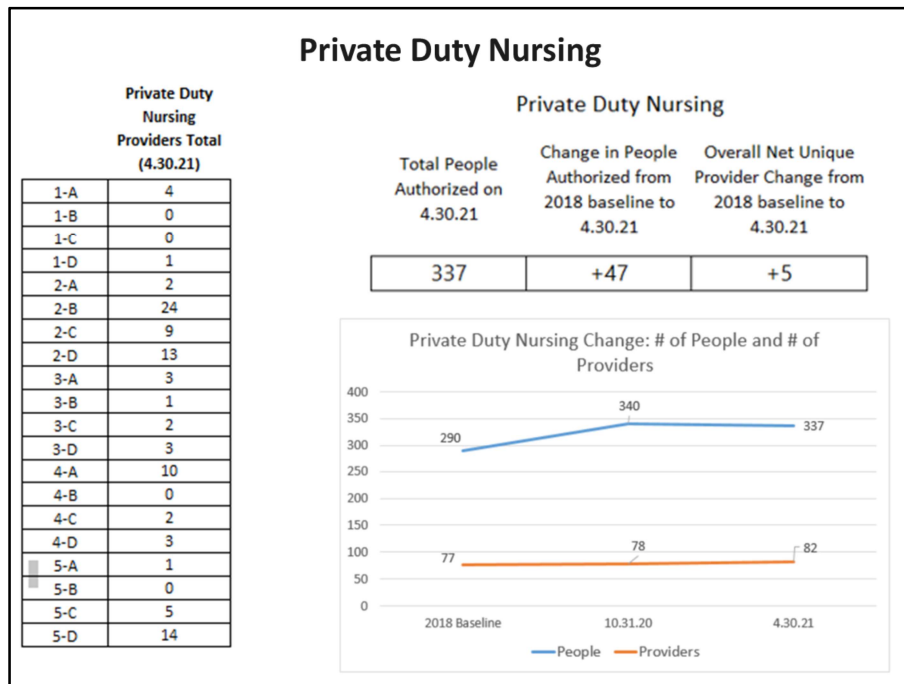


With a total number of authorizations for Crisis Support Services of 92, that is an increase of 77 people since June 2018, with a net loss of 1 unique provider.



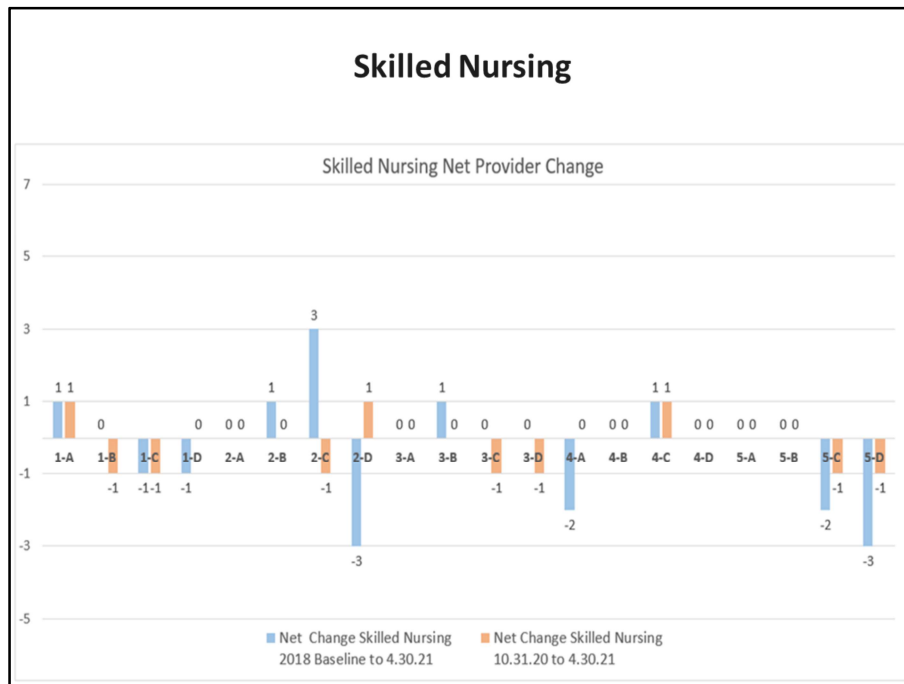


Private Duty Nursing also shows an increase during the reporting period of 1 provider in 2-C (Loudoun) and 4-C (Crossroads), and 2 providers in 2-D (Manassas/ Prince William) and 4-D (D-19). There has been a loss of 1 provider in 2-B (Fairfax), 3-D (Far Southwest), and 5-A (MPNN).

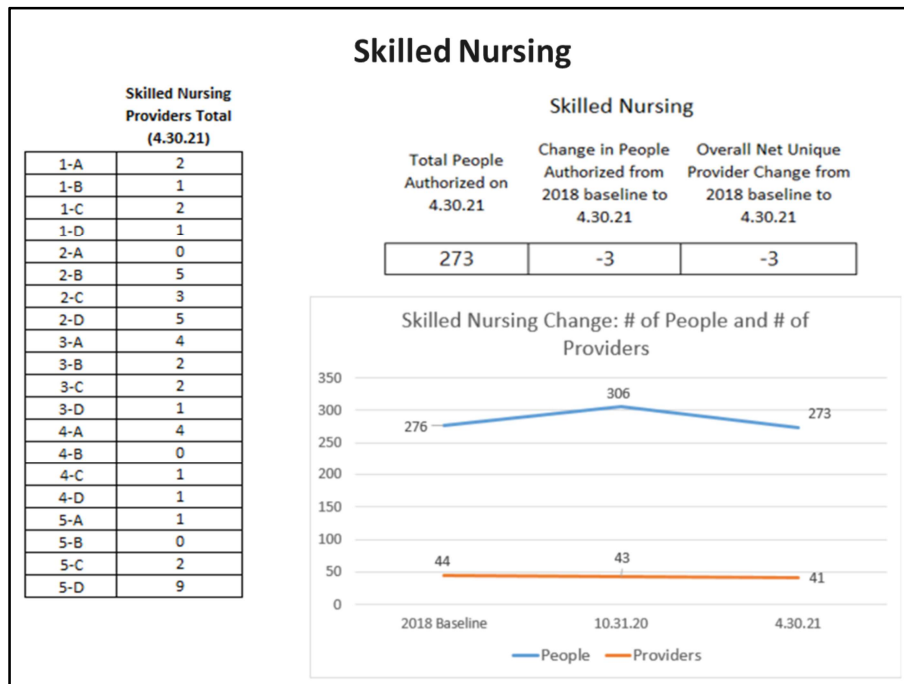


Looking at unique data, there were a total of 337 people authorized for Private Duty Nursing as of 4/30, which is an increase of 47. There is an overall net increase of 5 unique Private Duty Nursing providers.

As you can see when you look at total providers to the left that there is still a great need for nursing services in many areas throughout the state. We have recently added Nursing Services to the JumpStart funding program, so reach out to your Provider Team CRC for more information.

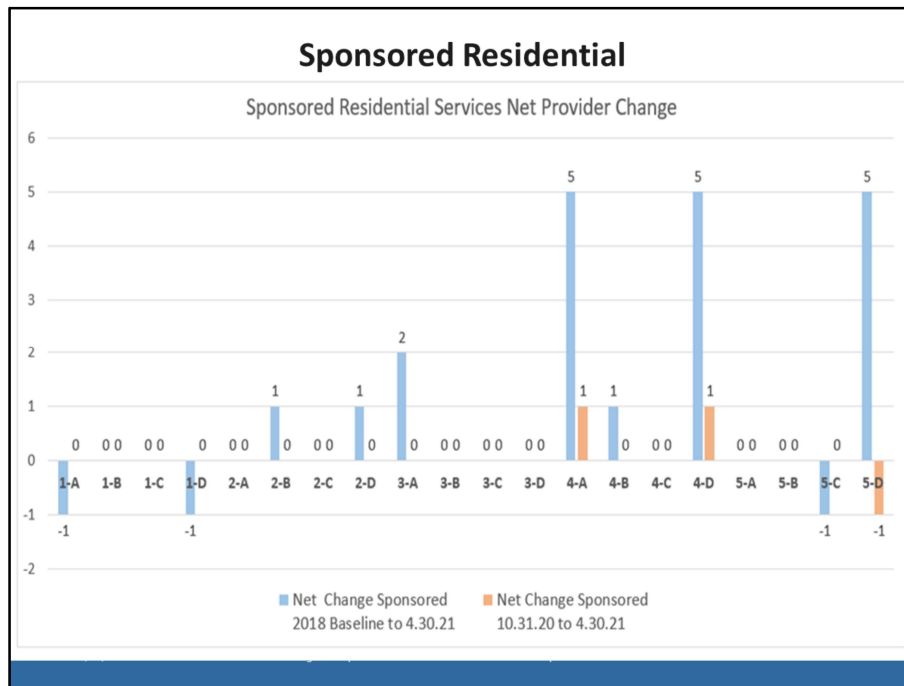


Here you can see there was a gain of 1 non-unique provider in 1-A (Rappahannock Area), 2-D (Prince William), and 4-C (Crossroads), with a net loss of 1 provider each in 1-B (Western VA), 1-C (Northwestern VA), 2-C (Loudoun), 3-C (Mt Rogers/NRV), 3-D (Far Southwest), 5-C (Colonial/HNNCSB), and 5-D (Tidewater).

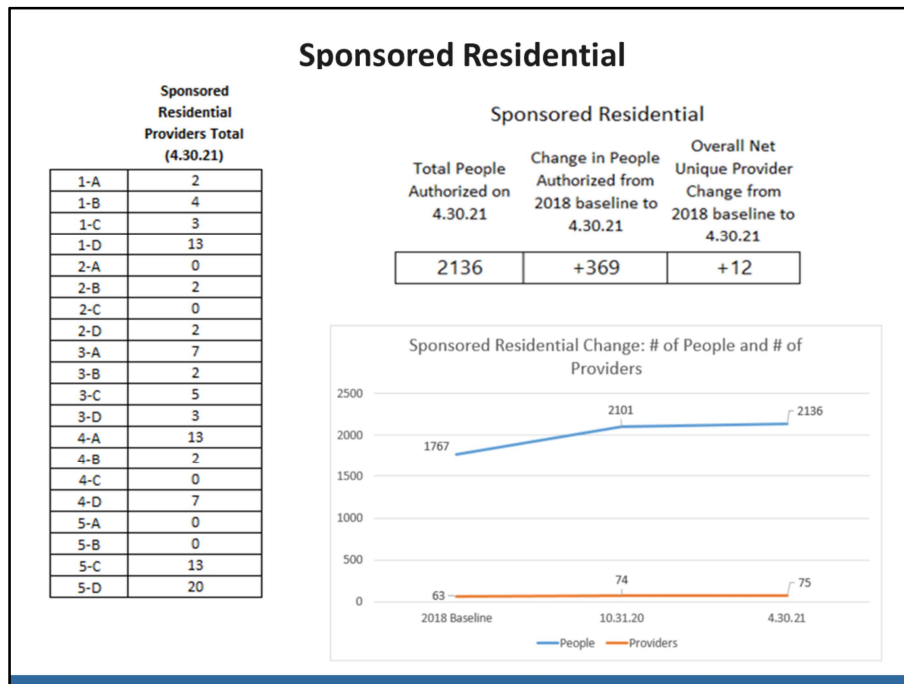


With a total number of authorizations being at 273 people, we see a net decrease of 3 people using Skilled Nursing Services. There has been an overall net loss of 3 Skilled Nursing Providers since 2018.

Skilled Nursing and Private Duty Nursing are now eligible for JumpStart funding, so please reach out to your Provider Team CRC if you are interested in providing nursing services in your area or expanding your services into an underserved area.



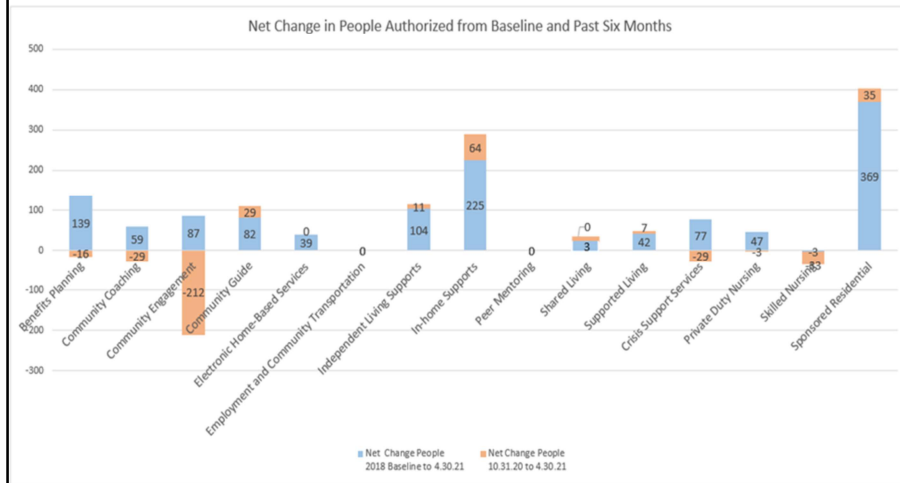
Notable non unique net changes in Sponsored Residential Services, are a net gain of 1 provider in 4-A (Richmond), 4-D (D-19), and a net loss of 1 provider in 5-D (Tidewater).



As we look at unique information, you can see that as of the end of April, there were 2136 people authorized for Sponsored Residential, an increase of 369 people from June 2018 and a net increase of 12 unique providers in that time period.

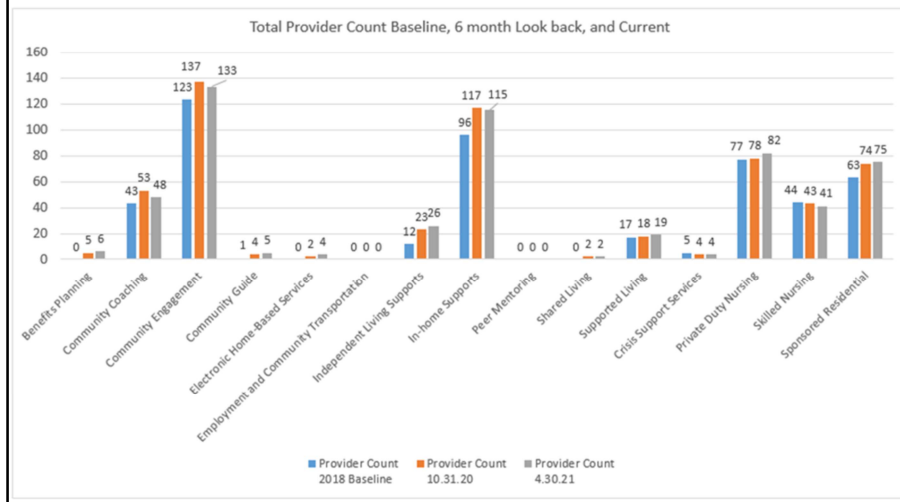
Subareas with no Sponsored Residential Providers are 2-C (Loudoun), 4-C (crossroads), 5-A (MPNN), and 5-B (Eastern Shore).

## Overall Change



The overall change in people authorized and provider counts are seen here. Significant declines in authorizations are noted in Community Engagement and Community Coaching, decreases that coincide with the extended period of the COVID-19 pandemic. It should be noted that interrupted services have resulted in suspended authorizations, but many individuals may continue to choose a provider, want services, and be seeking a clear date to return. DBHDS expects some loss in these services due to the pandemic, but also a readjustment over time as the pandemic subsides and reauthorizations occur.

## Overall Change



Here you can see the total provider count for each service starting in 2018, then in October 2020, compared with April 2021.



## Regional Support Teams



**Method:** The data used in this section is derived from the 1<sup>st</sup>, 2<sup>nd</sup>, and 3<sup>rd</sup> quarters FY21 RST reports by combining and categorizing the results in Section IX Barriers by Service for each Region.

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Provider Development leads five Regional Support Teams (RSTs) designed to provide support with ensuring informed choice and with removing barriers to more integrated service options across Virginia. This section highlights findings from RST processes.

DBHDS is working to integrate the RST referral process into the Waiver Management System to ease communication, tracking and data reporting and is now incorporating RST barrier data in this Provider Data Summary report. Transition of the RST process into WaMS is targeted for December 31, 2021.

During the 1st and 2nd Quarters of FY 21 there were 259 total referrals

## Regional Support Teams

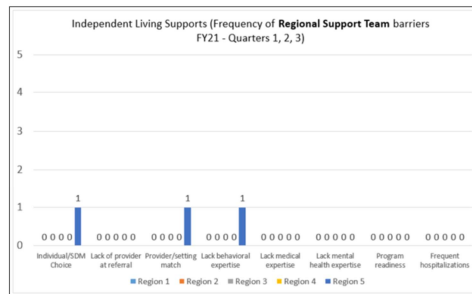


### RST Barrier Themes

- Individual/SDM Choice
- Lack of provider at referral
- Provider/setting match
- Lack behavioral expertise
- Lack medical expertise
- Lack mental health expertise

### Two additional areas

- Program readiness
- Frequent hospitalizations

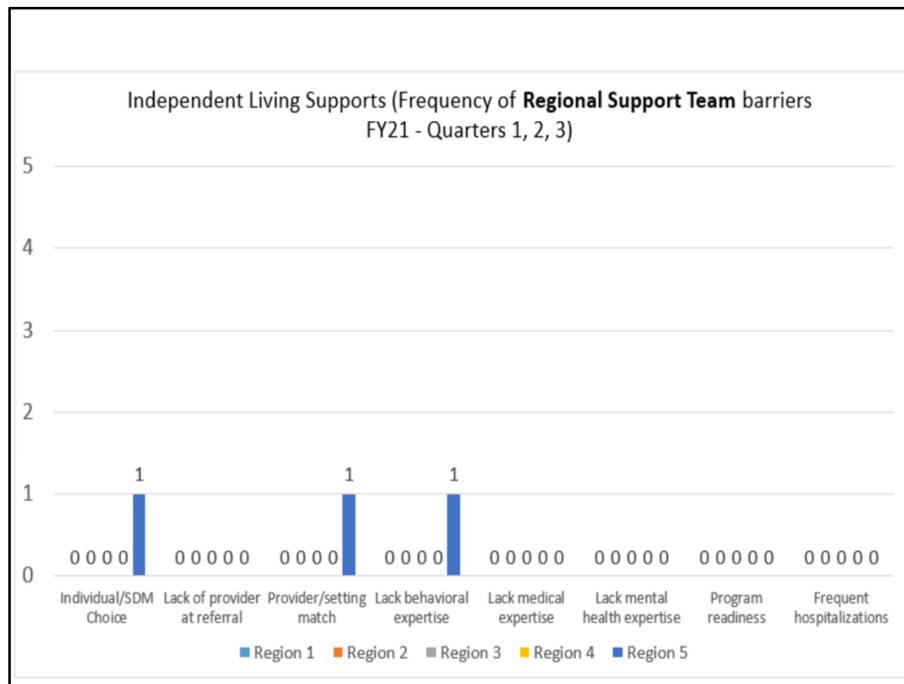


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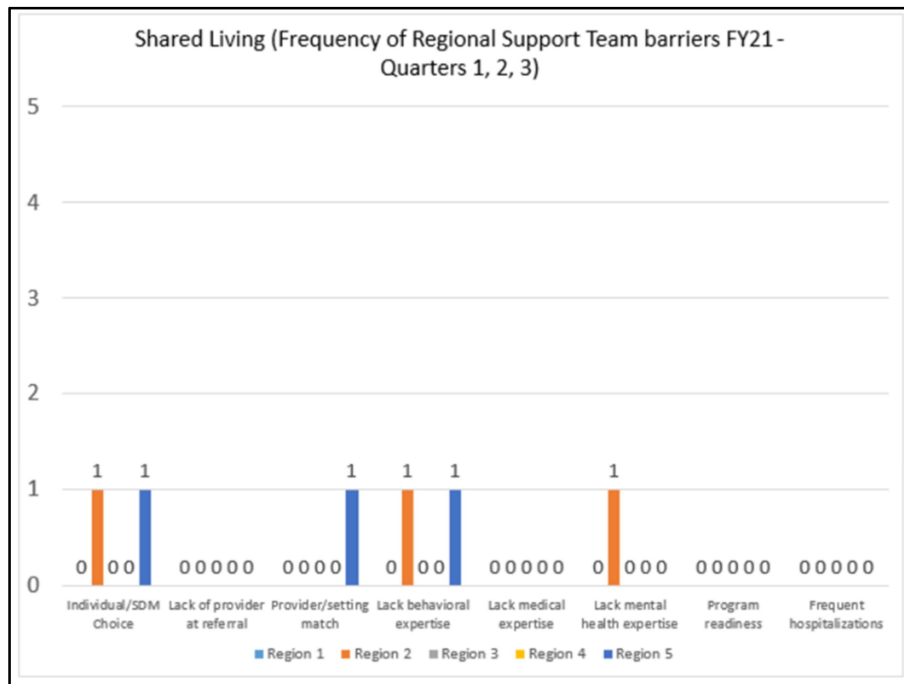
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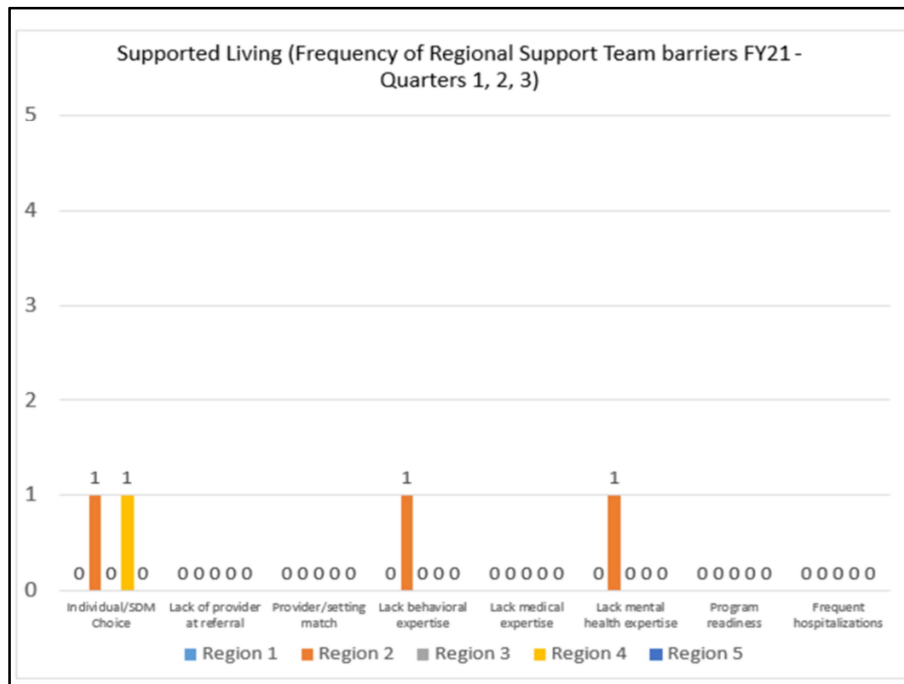
The barriers for the most integrated services were evaluated for frequency and location. The charts below provide details on five themes identified in the RST referral process and the distribution across regions during the 1st and 2nd quarters FY21 RST reports. The data results were consolidated into the categories provided. Barriers counts listed below are not inclusive of all possible barriers and may be duplicated across referrals. These charts represent the frequency a barrier was reported by region, upon initial referral, and within one of five given themes.



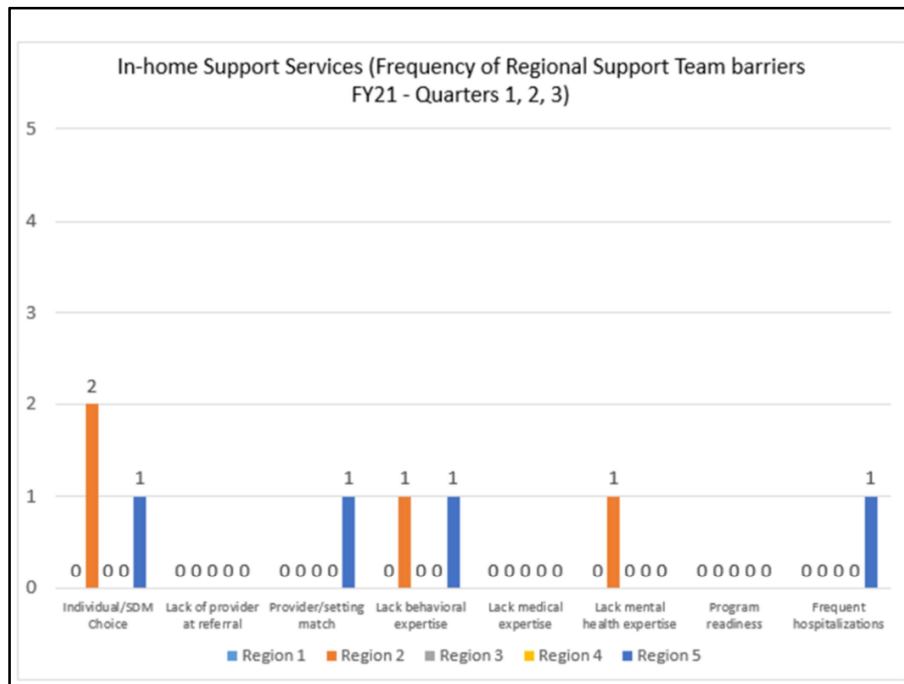
RST barrier theme frequencies for Independent Living Supports.



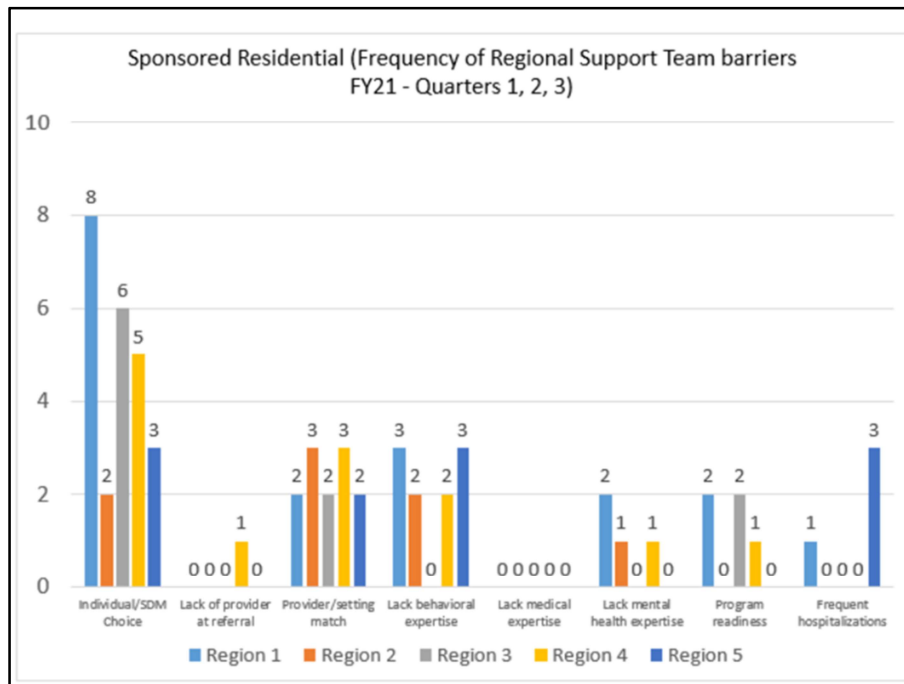
RST barrier theme frequencies for Shared Living.



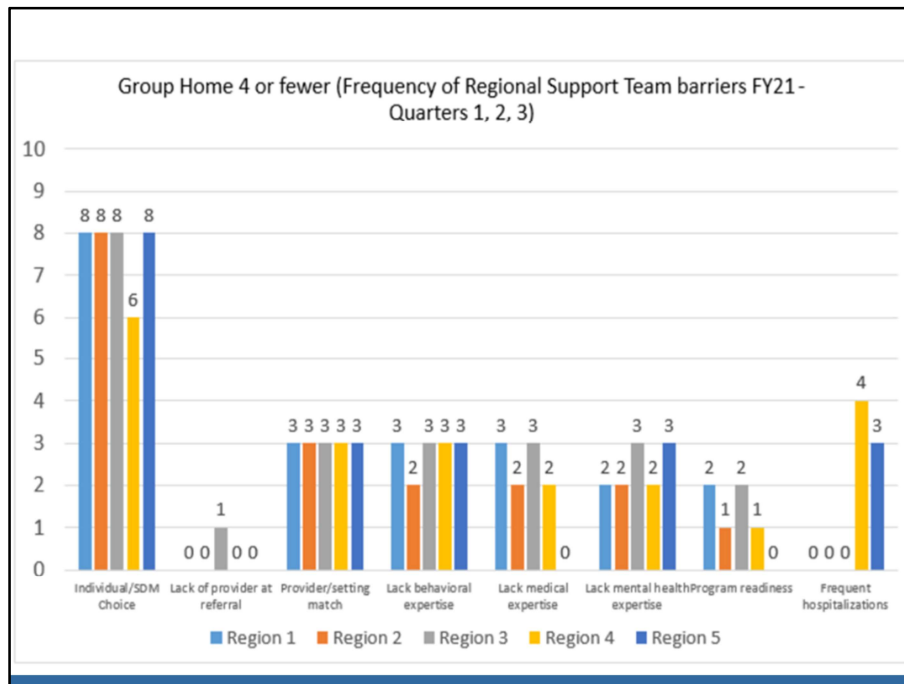
RST barrier theme frequencies for Supported Living.



RST barrier theme frequencies for In-home Support Services.

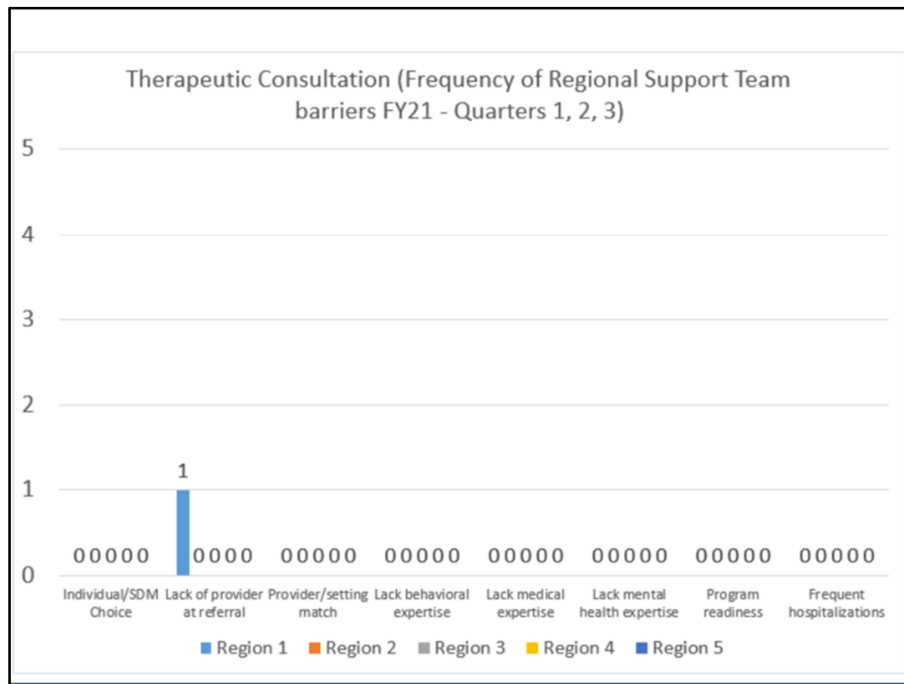


RST barrier theme frequencies for Sponsored Residential.

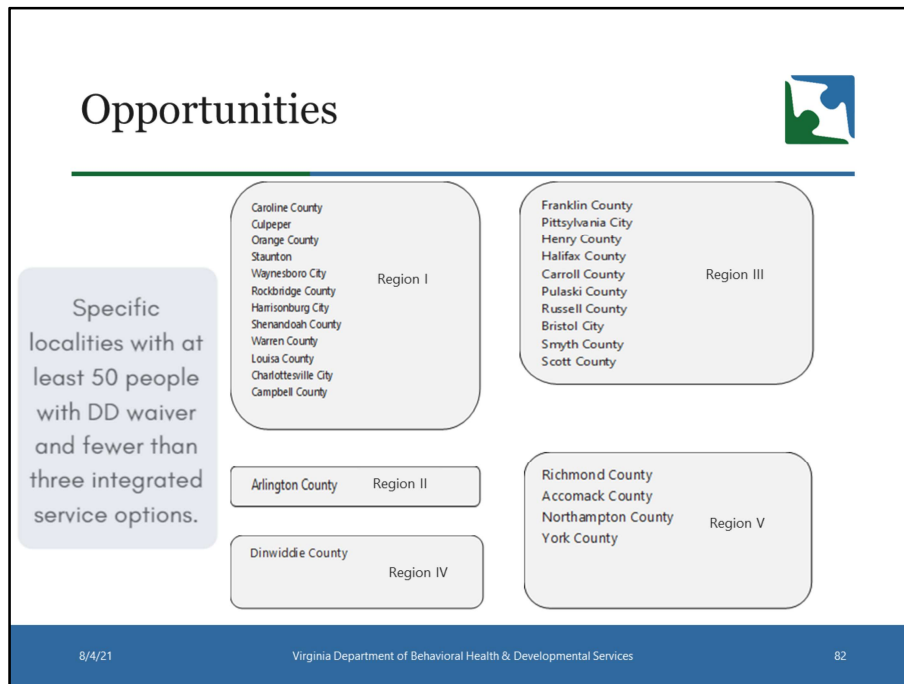


RST barrier theme frequencies for Group Home <5.





RST barrier theme frequencies for Therapeutic Consultation.



Opportunities to start or expand services are available in these localities that have at least 50 people with DD Waiver and fewer than 3 integrated service options.

## Next Steps



- developing and seeking approval for a quality improvement initiative focused on increasing the use of Employment and Community Transportation across all regions
- working directly with providers to address barriers to service provision with a concentrated focus on Community Guide, Employment and Community Transportation, Peer Mentoring, Crisis Supports Services, and Skilled Nursing
- updating and posting online the core provider training modules for all DD waiver services
- producing and distributing a searchable PDF version of the DD Case Management Manual
- continued participation in the community of practice initiative around Charting the Lifecourse©
- incorporating Business Acumen practices into provider development efforts
- increasing the number of providers per region identified as having expertise to support people with complex needs

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Next steps for Provider Development include:

- developing and seeking approval for a quality improvement initiative focused on increasing the use of Employment and Community Transportation across all regions
- working directly with providers to address barriers to service provision with a concentrated focus on Community Guide, Employment and Community Transportation, Peer Mentoring, Crisis Supports Services, and Skilled Nursing
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- increasing the number of providers per region identified as having expertise to support people with complex needs

## Questions & Suggestions



For more information, visit Provider Development online at

<http://www.dbhds.virginia.gov/developmental-services/provider-development>

Now we'd like to open the floor for any questions and suggestions you all might have.

(To end) You can find the November 2020 Provider Data Summary report and other information regarding the initiatives of the Office of Provider Development at the webpage on your screen.